308

McDonnell Douglas - St. Louis, MO

MOD000818963

MOD000818906

Date mailed:

October 14, 1987

Date received:

October 16, 1987

Response received:

November 11, 1987

Categorization:

2

McDonnell Douglas has apparently submitted the responses for both the ID numbers indicated above in one package. However, the facility has not distinguished between the two in the response. McDonnell Douglass has stated that they generate an average of 848 lbs/mo of a methylene chloride based solvent used in coating removal operations. They generate, on average, 18,518 lbs/mo of chlorinated solvent they call F001, F002. These come from metal cleaning and paint removal operations. Finally, they generate 39,763 lbs/mo of what they call flammable solvents and designate as D001, F003, F005. The wastes are stored in 55 gallon drums and transported to their in-house Hazardous Waste Storage Facility. Although the response does not say, observation of manifests indicates this is MOD000818963. The drums are then sent to LWD, Inc. in Calvert City, KY for incineration. Also, the facility has recently begun sending waste to Safety-Kleen in St. Charles, MO. Follow-up has been recommended for several reasons. Both of the subject ID numbers manifest shipments to LWD. The stated rates of generation are apparently for both facilities. Since MOD000818906 also manifests to MOD000818963 as do several other McDonnell Douglass ID numbers it is not completely clear where each stands in the waste generation process. Although the facility is identifying it's wastes as F-listed, it is unclear how these determinations are being made as included analyses are not specific concerning waste constituents. Finally, no information was provided concerning notification to the TSD of the land disposal restricted waste treatment standards. It is noted that the facility was one day late in it's response submittal.

JOHN ASHCROFT
Governor

FREDERICK A. BRUNNER

Director



Division of Energy
Division of Environmental Quality
Division of Geology and Land Survey
Division of Management Services
Division of Parks, Recreation,
and Historic Preservation

STATE OF MISSOURI

DEPARTMENT OF NATURAL RESOURCES

DIVISION OF ENVIRONMENTAL QUALITY

St. Louis Regional Office 8460 Watson Road, Suite 217 St. Louis, MO 63119 314-849-1313

September 24, 1987

LOW # 87-SL.047

Mr. Robert Kaatman, Section Manager Environmental Compliance - McDonnell Douglas Corporation Department 891C, Building 80 Level 2, Post C-2 P. O. Box 516 St. Louis, Missouri 63166



WASTE MANAGEMENT PROGRAM

Dear Mr. Kaatman:

Enclosed please find a report of an inspection conducted by Mr. Joe Haake of my staff. Please note that under the section titled "UNSATISFACTORY FEATURES" are findings requiring corrections be taken. The section titled "RECOMMENDATIONS" outlines the steps the inspector has determined will correct the violations noted in the report.

In order to document that corrective actions have been taken you are requested to submit a written response no later than November 15, 1987. The response should describe the steps taken to correct each Unsatisfactory Feature identified. Please direct the response to my attention.

It is our purpose by this letter to persuade you to take all necessary actions to comply with the Missouri Hazardous Waste Management Law. Failure to provide the written response as requested may result in the issuance of a Notice of Violation. Failure to achieve timely resolution of violations may result in the referral of this case for enforcement by the Waste Management Program.

Should you have any questions, or wish to confer in this matter, please contact me.

Sincerely,

DEPARTMENT OF NATURAL RESOURCES

Walt Puryeak

Chief, Waste Management Unit

St. Louis Regional Office

WP:mc Encl.

CC: Central Office - WMP

27.080 McDonnell Douglas Corp. Tract I

JOHN ASHCROFT

Governor

FREDERICK A. BRUNNER

Director



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St. Louis Regional Office 8460 Watson Road, Suite 217 St. Louis, MO 63119 314-849-1313

HAZARDOUS WASTE COMPLIANCE INSPECTION REPORT

FACILITY

McDonnell Douglas Corporation Department 891C, Building 80 Level 2, Post C-2 P. O. Box 516 St. Louis, Missouri 63166 (314) 232-3319 MDNR GENERATOR ID#: 01001 U. S. EPA ID#: MOD000818963 FACILITY PERMIT #: 0SO 062284 002

Mr. Robert Kaatman - Section Manager, Environmental Compliance

INTRODUCTION

An inspection of the McDonnell Douglas Corporation (MDC) - Tract I facility was conducted on September 17, 1987, to assess compliance with the hazardous waste facility permit and applicable requirements pursuant to the Resource Conservation and Recovery Act and the Missouri Hazardous Waste Management Law. Mr. Joe Haake, Environmental Specialist, represented the Missouri Department of Natural Resources - St. Louis Regional Office. Messrs. Robert Kaatman and Brian Kury of the Environmental Compliance Section represented the facility.

INTRODUCTION

The MDC - Tract I facility is primarily a manufacturing site for high technology aerospace products including military aircraft, space systems, and missiles. Hazardous wastes generated at the facility are those associated with the fabrication of aluminum, titanium, composite structures, and other materials used in the manufacture of items such as airframes. A total of forty-nine (49) hazardous waste streams, which are registered with the Missouri Department of Natural Resources, continues to be generated at the site. These waste streams include acid and alkaline solutions, halogenated and non-halogenated solvents; parnt sludges and solids, pretreatment sludges, cyanide solutions, explosives, jet fuel, oil, and miscellaneous laboratory chemicals.

The Tract I facility is a fully permitted TSD facility and utilizes a variety of tanks for storage of hazardous waste. Containerized hazardous waste is also stored at the site. The containerized waste storage area is designated as the site which manages the drummed hazardous waste from each of the ten (10) other MDC generators located in the metropolitan

St. Louis area. Wastes generated at these sites are transported to the Tract I area via licensed MDC vehicles.

Hazardous waste in storage at the facility is eventually hauled by licensed transporters to off-site disposal or resource recovery facilities. The contractors currently used are as follows:

- 1. Heritage Environmental Service in Indianapolis, Indiana.
- 2. L. W. D., Inc., in Calvert City, Kentucky.
- 3. Peoria Disposal Company in Peoria, Illinois.
- 4. Chemical Waste Management in Emelle, Alabama.
- 5. Trade Waste Incineration, Inc., in Sauget, Illinois.
- 6. Rollins Environmental Services in Deer Park, Texas.
- 7. Kiesel Oil Company in St. Louis, Missouri.

No process changes have occurred since the issuance of the hazardous waste facility permit. Reference should be made to the MDC permit application for a complete description of the permitted storage components and generated hazardous wastes.

UNSATISFACTORY FEATURES

- 1. The leak detection systems for underground storage tanks were not operational as required by 10 CSR 25-7.264(2)(J)4.
- 2. Resource recovery certification had not been applied for as required by 10 CSR 25-9.010(1)(C).
- 3. The facility contingency plan was not current as required by 10 CSR 25-7.264(2)(D) incorporating by reference 40 CFR 264.54.

DISCUSSION

Approximately eighty-two (82) 55-gallon drums and several 5-gallon carboys of corrosive hazardous waste were observed in section 1 of container storage area 1. Section 2 of container storage area 1 contained approximately one hundred twelve (112) 55-gallon drums of waste oil and sixty-nine (69) 55-gallon drums of waste solvent, paint sludge, and other hazardous waste. A total of twenty-four (24) 55-gallon drums of cyanide and sulfide waste were present in container storage area 2. No waste was observed in container storage area 3. The storage of containerized waste appeared to be in accordance with the facility permit.

An inspection of the tank storage areas revealed that the six (6) 750-gallon and five (5) 500-gallon aboveground tanks for storage of waste nitric acid and hydrofluoric acid generated in the milling of steel and titanium at building 52 had been removed. The five (5) 500-gallon tanks were replaced with three (3) 850-gallon aboveground tanks.

It was also observed during the inspection of tank storage areas that the leak detection systems for tanks at fuel pit 3 and 4, tanks at ramp station 1 and 2, the F-18 silencer tank, and the hush house tank were not operational. Inspection records indicated that the systems had not been functioning since July 1987. It was explained that the ground water probes were damaged and could not be replaced due to discontinuance by the manufacturer. The facility is in the process of purchasing new leak detection systems.

During chemical milling operations a maskant is applied to metal parts. As the maskant dries the perchloroethylene carrier evaporates and is captured in a vapor recovery hood. The hood discharges to a carbon absorption unit. The captured perchloroethylene is then stream stripped from the carbon, the water is separated out, and the perchloroethylene is recovered as pure solvent. The recovered perchloroethylene is returned, for use as an ingredient in new maskant, to the company that manufactures the maskant material.

In a letter dated February 2, 1987, to Mr. Robert Kaatman, Supervisor, Environmental Compliance - MDC from Mr. Kenneth Davis, Chief, Data Management Unit - Missouri Department of Natural Resources, it was explained that the captured perchloroethylene is a sludge defined by 40 CFR 260.10 because it is a waste generated by an air pollution control facility. Also, in accordance with 40 CFR 261.2 a sludge is a solid waste when reclaimed. Since the captured perchloroethylene is a hazardous waste the recovery of the waste is considered a resource recovery operation, and certification from Missouri Department of Natural Resources must be obtained. At the time of the inspection resource recovery certification had not been applied for.

A review of the facility contingency plan revealed that the list of emergency coordinators was not up to date. Mr. Kaatman stated that the plan was currently being revised. All other required records were found to be in compliance with permit conditions and applicable state and federal regulations.

RECOMMENDATIONS

- 1. Repair or replace the leak detection system for underground tanks.
- 2. Submit a resource recovery application for the certification of the perchloroethylene recovery operation.
- 3. Amend the facility contingency plan to include a current list of emergency coordinators.
- 4. Submit certification that the six (6) 750-gallon and five (5) 500-gallon aboveground hazardous waste storage tanks were removed in accordance with the approved facility closure plan. The certification must be signed by the owner/operator and an independent professional engineer.

APPROVED BY:

F. Donald Maddox

Regional Administrator

St. Louis Regional Office

PREPARED BY

Joe Haake

Environmental Specialist St. Louis Regional Office

FDM/JH/mc

HAZARDOUS WASTE PERMITTED TSD FACILITY Date: 9-/7-87 GENERATOR CHECKLIST

Name of Facility: McDonbell Douglas CORP. MO Permit # @So 062284 002 Address: P.O. Box 516 MO I.D. # 0/00/ ST. LOUIS MISSOURI 63166 EPA I.D. # 100000 818963 Contact: MR. ROBERT KAATMAN Phone No.: 3/4-232-33/9 Transporter? YES , # HO1039 , Resource Recovery? YES , # -Provide a brief description of the manufacturing process: MANUFACTURING OF HIGH TECHNOLOGY AEROSPACE PRODUCTS INCLUDING MILITARY FIGHTER AIRCRAFT, SPACE SYSTEMS, AND MISSILES. PROCESSES INCLUDE METAL CUTTING, MILLING, FORMING, GRINDING, AND ELECTROPYTING; DEGREASING; PAINTING; CHEINICAL PROCESSING; AND AIRCRAFT FUELING OPERATIONS. Describe any new processes added since permit issuance: NowE Any new waste streams? No WASTE MANAGEMENT General comments and observations: THE SIX 750 GALLON ABOUE GROUND STORAGE TANKS (H-1 THROUGH H-6) AIND THE FIVE END GALLON AROVE GROWND STORAGE TANKS (H-12 THROUGH H-16) HAVE REEN REMOVED. THE FIVE 500 GALLON TANKS WERE REPLACED WITH THREE 850 GALLON ABOVE GROWND PANKS.

· List the hazardous wastes produced: Waste Amount/month Kilogram/month I.D. # Disposition 1. 49 SEPARATE ~ 42600 LB ~ 19369 LANDFILL 2. HAZARDOUS WASTE ~4357/ LB 219805 INCINERATION 3. STREAMS. ~456583 LB ~201537 TREATMENT _____^ 109150 4B 2 49413 RESOURCE RECOVERY ~651904 4B ~ 296324 KG Total Subtract amount going to Resource Recovery or sewer 149613kg Amount subject to generator fee (KKG) ~246.7// (subject if over 2000 lbs. of waste is produced per year) Is generator fee applicable to this facility? Yes _____ No ____ If so, is the fee being paid? Yes _____ No ___ MANIFESTS (10 CSR 25-5.010(4)) Cenerator's Missouri and EPA I.D. Number Serially increasing shipment number

Generator's name, address, phone number, EPA I.D. number

All transporter's names, addresses, phone numbers, and EPA I.D. numbers

Hazardous waste management facility name, address, phone number, and EPA Proper DOT shipping name and hazard class Quantity, container type, and number of units being shipped Emergency instruction and special handling procedures 18. Emergency instruction and special handling procedures
Proper certification
10. Manifest properly signed and dated
11. Time between generator and facility signature less than 10 days
12. Copy to generator in 30 days
13. If not, exception generator report submitted within 45 days
14. Completed manifests submitted to Department quarterly
15. Copy at facility for three (3) years at racility for three (3) years Comments on manifests CONTAINERIZATION AND LABELING Waste properly containerized and labeled during storage if it is being transported off-site (5.010(6)) Are wastes stored at non-permitted locations marked with the date of accumulation (7.050(2)(A)4.)@ 3. Are wastes stored at non-permitted locations stored for less than 90 days (7.050(2)(A))Inspector's Name: Title: SZT Office: _____ SLRO

100.00

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Waste Analysis Plan

1. Have the manufacturing processes at the facility changed since the permit was
                  issued (yes, blacken box)
Is procedure to confirm wastes received from off-site being followed (7.011(3)(C)3:)
       Security (7.011(3)(D))

1. Iwenty-four hour surveillance or provision 2 and 3
2. An artificial or natural barrier in good condition and provision 3
3. Restricted access at each entrance
4. Warning signs legible from 50' on all approaches
          Ceneral Inspection
Conduct an inspection using the facilities checklist
                 Does facility inspection schedule identify problems which could be expected (no,
   2.
                 Does the schedule inspect the following: (7.011(3)(E)2.)
                          monitoring equipment
safety and emergency equipment
security devices
                 C.
                          operating and structural devices
                Are inspections being conducted regularly and at the proper (7.011(3)(E)1.)
                                                                                                                                          eguSEP 3 0 1987
        Personnel Training (7.011(3)(F))

1. Have employees completed classroom or on-the-job training PROGRAM

2. Job title description and name of person filling position regularly updated

3. Written record or the type and amount of training given to each person

4. Documentation confirming that training has been given

5. Is there continuing training given (yearly update)

6. Are new employees trained within 6 months
                                                                                                                                          WASTE MANAGEMENT
  Predaredness and Prevention (7.011(4))

1. Internal communications or alarm system in operation

2. A device in the hazardous waste operation area cable of summoning emergency
  3456~8
               Portable fire extinguishers and fire control equipment
               Spill control equipment and decontamination equipment
Adequate water supply
Safety Equipment (Fire blankets, gas masks, eye wash)
Access to communications or alarm when waste is being handled
               Adequate aisle space at drum storage area
Arrangements with local authorities updated (ie: when a new emergency coordinator is assigned is a new copy sent to local emergency authorities)
 Contingency Plan and Emergency Procedures

1. Contingency plan easily accessible

2. List of emergency coordinators up-to-date (7.011(5)(E)4.)

3. List of all emergency equipment up-to-date (7.011(5)(E)5.)

4. Check location of emergency equipment for several items on
              Check location of emergency equipment for several items on the above list (If cannot be located, blacken box)
5.
            Evacuation plan easily accessible or displayed Has the contingency plan ever been implemented (no check box, yes blacken box)
      Manifests
For oli-site facilities
             Manifests signed and dated (7.011(6)(A)1.)
Copy to transporter (7.011(6)(A)1.)
Copy to generator in 15 days (7.011(6)(A)1.)
Copy at facility for 3 years (7.011(6)(A)1.C.)
Are manifests in good systematic order
Are manifest discrepancies reported properly (7.011(6)(A)1.A. and B.)
12345
W
Recordkeeping
             Operating record available (7.011(6)(B)1.)
             Operating record must include the following: (7.011(6)(B)2.)
                       information from each manifest
B
                      method of treatment, storage, or disposal for each hazardous waste and the
             ь.
                     date accomplished location and quantity of each waste at the facility (verify several by field check) a description of each waste a description of the process that produced each waste applicable hazardous waste numbers
14
             C.
            d.
             е.
            1.
                      weight or volume-density with units
            g.
                     methods, locations, and dates with reference to manifest numbers and/or chain of custodies
            Volumes, dates removed, and disposition of leachate (7.011(6)(U)2.D.)
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		4. Records and results of monitoring, testing, and analysis performed (8.011(6)(B)2.E. and H.)
1	C	5. Summary reports on incidents requiring implementation of contingency plan
	9	(7.011(6)(B)2.F.) 6. Records of inspections (7.011(6)(B)2.G.) 7. Waste analysis records from off-site sources and notices of acceptance to
		generators (7.011(6)(B)2.I.) 8. All closure and post closure cost estimates (7.011(6)(B)2.J.) 9. A complete copy of the permit application (7.011(6)(B)2.K.)
	LG/1	10. Personnel training documentation (7.011(6)(B)2.L. and M.) 11. Record documenting refusal of arrangements from local emergency response
	771	authorities (7.011(6)(B)2.N.)
		Reporting 1. Monthly Facility Reports available and submitted (7.011(6)(C)1.A.) 2. Are wastes received and not manifested reported within fifteen (15) days (7.011(6)(C)1.D.)
المعالم المعالم المعالم	a	Financial 1. Has the closure cost estimate been adjusted annually (7.011(8)(B)1.) 2. Is the closure cost estimate kept at the site (7.011(8)(B)4.)
	<u> </u>	Containers
7.3	19	property line (7.050(3)(A)1.) 2. Containers in good condition(7.050(3)(C))
		3. Containers closed during storage(7.050(3)(E)1.) 4. Has the facility conducted and recorded the results from weekly inspections
I.	'ra'	5. Is the containment system free from cracks or gaps (7.050(3)(G)2.A.)
	/	condition)
		7. Are any hazardous wastes stored outside the storage area (if no check, if yes blacken, these wastes must comply with 7.050(2)(A))
	@ .	
57 F. A4		2. Does the leak detection system indicate leakage (if no check, if was blacken)
110416	<u>जिल</u> ्ल	4. Are tanks with overfilling control equipment tested once a day (7.050(4)(E)1.A.) 5. Is data from monitoring equipment recorded once each operating day
	@	(7.050(4)(E)1.B.) 6. For uncovered tanks is the freeboard checked at least once a day (7.050(4)(E)1.C.)
	رُف	7. Are the construction materials inspected weekly to detect corrosion, erosion and leaking fixtures or seams (7.050(4)(E)1.D.)
	(P)	8. Is the area immediately surrounding the tank inspected weekly to detect signs of leakage (7.050(4)(E)).E.)
•	T 1	Surface Impoundments 1. Are inspections conducted weekly and after storms (7.060(3)(B))
		 Are overtopping control systems functioning properly (7.060(2)(B)) Has there ever been a sudden drop in the level of the impoundment (7.060(3)(B)2.)
		4. Have liquids been collected in the leachate collection and removal system (7.060(3)(B)3.)
	밀	 5. Is there any erosion or other signs of deterioration (7.060(3)(B)4.) 6. Do the surface impoundments have adequate freeboard as described in the permit (7.060(2)(B))
0/	YA	Groundwater Monitoring and Post-Closure Permits 1. Wells in good condition, properly covered and locked
		2. Wells properly sealed to prevent surface infiltration 3. Test pumps for faucets if present
		last data results and record last sampling date and
		Please mark boxes as shown below
		IN COMPLIANCE OR IN COOD CONDITION
ā .		IN VIOLATION OR IN POOR CONDITION (Must be described in the report)
		inspector's Name: of Haale
		litte:ESTT
		Officer

e was one of

CERTIFIED MAIL

RETURN RECEIPT REQUESTED

Mr. Jerome Patterson McDonnell Douglas Corp. Tri I P O Box 516 Dept. 191C St. Louis, MO 63166

RE: Request for Information

McDonnell Douglas Corp. Tri I St. Louis MOD000818963

REQUEST FOR INFORMATION

Dear Mr. Patterson:

Under Section 3007 of the Resource Conservation and Recovery Act (RCRA), Title 42 U.S.C. Section 6927, the Environmental Protection Agency (EPA) may require you to furnish information relating to your wastes and waste management practices. Pursuant to Section 3007 of RCRA, for the purposes of determining compliance and possible enforcement, EPA hereby requires that you respond to the following questions in writing within fifteen (15) days of receipt of this letter.

Sections 3004 (d) through (k) and (m) and Section 3005 (j) of RCRA, 42 U.S.C. Section 6924 (d) through (k) and (m) and Section 6925 (j), require the EPA to ban, subject to limitations, or restrict the land disposal of hazardous waste. Prohibitions and restrictions on the management of wastes containing specified solvents became effective on November 7, 1986 (51 Federal Register pg. 40636; November 7, 1987). These prohibitions and restrictions are set forth in 40 CFR Part 268 and in revisions to 40 CFR 260 through 265 and 270.

Your facility has notified the EPA pursuant to the requirements of RCRA that you facility manages hazardous waste as either a generator, transporter, and/or treatment, storage, and disposal facility. These wastes are potentially affected by the new land ban regulations.

Definitions

"You" or "your" refers to your facility, including its officers, employees, and consultants.

A solvent is defined as a substance used to solubilize (dissolve) or mobilize other constituents. A solvent is considered "spent" when it has been used and is no longer fit for use without being regenerated, reclaimed, or otherwise reprocessed. Examples of spent solvents include solvents that are being used as degreasers, cleaners, fabric scourers, diluents, extractants, and reaction and synthesis media. Manufacturing process wastes containing solvents are not spent solvents.

The definitions in RCRA and the RCRA regulations, 40 CFR Parts 260-271 apply.

Information Requested

- 1. The name of the person with your facility to contact regarding this request, including title, address, and telephone number.
- 2. State whether at any time after November 7, 1986, you generated, transported, treated, stored, and/or disposed of 1) F001, F002, F003, F004, and/or F005 wastes as defined at 40 CFR Part 261.31, and/or 2) D001 wastes as defined at 40 CFR 261.21, and/or 3) a mixture of any of the aforementioned wastes. If you are unable, based upon information immediately available to you, to determine the designation of your waste, provide information concerning solvent type wastes that you have generated or handled. Examples of solvent type wastes are given in the definitions section of this letter.
- 3. For each waste identified above, give the rate of generation in pounds per month (lbs./month).
- 4. For each waste identified above, please provide all chemical analyses, Material Safety Data Sheets, manufacturers information, and any other information used to characterize the waste.
- 5. For each waste identified above, provide a brief description of the generation, transportation, treatment, storage and/or disposal process(es).
- 6. For each waste identified above, provide information concerning how the waste was managed from the time the waste was generated or came into your possession up to its final disposition or the time the waste left your possession. This should include copies of all manifests, treatment standard notifications and certifications, servicing agreements, bills of lading, and invoices.

You may, if you desire, assert a business confidentiality claim covering part or all of the information submitted to, or reviewed by, EPA. Such a claim may be made by placing on (or attaching to) the information, at the time of its submittal to, or review by, EPA, a cover sheet, stamped or printed legend, or other suitable form of notice employing language such as "trade secret," "proprietary," or "company confidential." Allegedly confidential portions of otherwise non-confidential documents should be clearly identified and may be submitted separately to facilitate identification and handling by EPA. If confidential treatment is sought only until a certain date or until the occurrence of a certain event, the request should so state.

Information submitted for which a claim of confidentiality is made will be disclosed by EPA only to the extent and by the means authorized by the procedures specified in 40 CFR Part 2, Subpart B (1985), as amended by 50 Federal Register 51654 December 18, 1985. If no such claim is made when information is received by EPA, the information may be made available to the public without further notice.

Please note that you are required to submit this information within fifteen (15) days of receipt of this letter. The response must be submitted to Jacobs Engineering Group Inc., a designated contractor to the EPA. Specifically, you should submit your response to:

Jacobs Engineering Group Inc. Attn: Terry Hagen 8207 Melrose Drive, Suite 114 Lenexa, KS 66214

Should you require a longer period to respond to the information request, you may be granted, by EPA, a one-time extension of 15 days. To request an extension you must contact your EPA RCRA State Coordinator, Marc Rivas, at 913/236-2891.

Failure to respond to these questions within 15 days of receipt of this letter may subject you to an enforcement action under Section 3008 of RCRA, 42 U.S.C. Section 6928. Such enforcement action may include the assessment of penalties of up to \$25,000 for each day of noncompliance.

Should you have any questions concerning this matter, please contact Terry Hagen or Carla Rellergert at 913/492-9218.

Sincerely yours,

David A. Wagoner Director Waste Management Division

MCDONNELL AIRCRAFT COMPANY

Box 516, Saint Louis, Missouri 63166 (314) 232-0232

03 November 1987

RECEIVED REGION VII

NOV 1 1 1987

Jacobs Engineering Group Inc. 8207 Melrose Drive, Suite 114 Lenexa, Kansas 66214 Attention: Terry Hagen

REGISTERED MAIL - RETURN RECEIPT -

Gentlemen:

The United States Environmental Protection Agency requested information on solvents used at our facility since 07 November 1986. The enclosed information is submitted to you in response to this request.

McDonnell Douglas Corporation - St. Louis generates the following solvent wastes.

- Methylene Chloride/Phenol/Formic Acid (F002): an average of 848 pounds per month is generated from coating removal operations.
- Chlorinated Solvents (F001, F002): an average of 18,518 pounds per month is generated from metal cleaning and paint removal operations.
- Flammable Solvents (D001, F003, F005): an average of 39,763 pounds per month is generated from metal cleaning and painting operations.

Each of these wastes is placed in 55-gallon drums, then transported by McDonnell Douglas to our in-plant Hazardous Waste Storage Facility. The drums are held at the storage facility until they are removed from the plant by a disposal firm under contract to McDonnell Douglas for incineration in a hazardous waste incinerator.

Enclosed are copies of analyses performed by independent laboratories under contract to McDonnell Douglas. Due to the very large quantity of waste solvents generated here, it was not possible to include every analysis report; instead, several representative reports on each wastestream are enclosed.

We have also included copies of all pertinent Hazardous Waste Manifests, Purchase/ Sales Agreements, and invoices.

Please contact us if additional information is needed.

Sincerely,

MCDONNELL AIRCRAFT COMPANY

Barbara ME Ku

B. E. McKee, Planner Environmental Compliance Dept. 891C, Bldg. 80 (314) 895-5236

Concur: R. H. Kaatman, Section Manager

Environmental Compliance

Dept. 891C

MCDONNELL DOUGLAS

CORPORATION

Secti	on E Composition		- testing that	_
Compa	sftion: List all the hazardous all other major compon	components of ents by weight	the waste and the concentration. List percentages.	
Major		(wt.\$)	Extraction Procedure Concentration (ppm)	
	Methylene Chloride	75%		
2.	Formic Acid	1.5%		
1.	Pheno1	12%		
4.				
5.				
6.				
7.0				
Sec	tion F - Physical Data		Slurry Liquid Compressed gas	
1.	Physical State (Circle One): Appearance and Odor: Dar	solid Sludge With DUN	gent phenolic odor	<u> </u>
10:	Solubility in water None		I by weight of your ries at our	-
1	Specific gravity (H20-1)	189 0.	Bolling Point (°C) 45 ph 1855 than 2	
5.	Vapor density (Air-1)		hu	
6.	% by weight of volatiles at 10	20°c 92%		
Se	ction G - Fire and Explosion Da		and one tester ASTN std	-
1.		plicable) - Pen ester method AS dry chemical,		•
2.	4 / 7	water foll.	Water shiets	
	1.	other, specify		
1	Does not apply			
Si	ection H - Health Hazard Data			
1	A THE PROPERTY OF THE PARTY OF	Corro	sive to skin	
٠,		Elw-h	eyes and skin with water:	
2	. Emergency and First Ald proc	edure <u>Flush</u>	eyes and skin with water:	
_	consult physician			

from Missouri wastestream registration Methylene Chloride/Phenol/Formic Acid (F002)

lo	<u>. l</u>			
cti	vity Data:			
			X	Decomposes upon heating;
		Unstable Stable		emits highly toxic fumes
		l		
l.	ncompatibili	ty (materi	als to evol	Nitrates, oxidizers, open flame
H	azardous olymerizatio	n Ha	Occur Not Occur	1 1
eti	on J			
=				
p#111	or Leak Pro)CEGULAR:		
	s to be taken	n in case	meterial is	s released
r ety				
	Conta	in and	recover	
ect	ton K			
_	cial Protecti	an Inform	etion:	Chlorinated and acidic vapors
1.	Respiratory	Protection	m (specific	t type)
				Rubber or PVC
2.	Protective	gloves		
_	Eye Protect	lon		Face shield
3.				Rubber or PVC suit
4.	Special Clo	thing (sp	ecify type)	Rubber of FVC sure
s. H	Precaution andle as lammable	corros	ine bor	diing and storing (son; do not store with oxidizers or
6.	Other Prec	autions		
7	. 24-hour m	mrgency (hone number	(314) 232-0232
5	ection L			
-	ontainerizat	ton:		and taken and the
١		antata Mi	Containers	s, labels and placards required for transportation.
	specify appro	Printe DO	CI Line	r; Corrosive

Environmental Analysis, Inc.

3278 N. Lindbergh Blvd. · Florissant, MO 63033 · 314-921-4488



MCDONNELL-DOUGLAS

PAGE NO : REPORT NO :

21846

DATE: 07/16/86

RESULTS OF ANALYSIS

				UNITS OF
LOG NUMBER	SAMPLE DESCRIPTION	NAME	RESULTS OF ANALYSIS	EXPRESSION
704718	3906 VAN STRAAT 759 041	Flash Point (PM) Specific Gravity	>100 0.979	deg. C
704719	3911 LA 240 PREDIP	Hexavalent Chromic Copper Flash Point (PM) Nickel pH Value Specific Gravity	547 >100 <5.0 0.71	% w/w mg Cu/l deg. C mg Ni/l pH Unit g/ml
704720	3914 PCK CG 120	Hexavalent Chromi Copper Flash Point (PM) Nickel pH Value Specific Gravity	9.00 >100 <0.05 8.72	% w/w mg Cu/l deg. C mg Ni/l pH Unit g/ml
704721	3915 CU SULFATE	Hexavalent Chromi Copper Flash Point (PM) Nickel pH Value Sulfates Specific Gravity	498 >100 0.11 12.68 0.65	% w/w mg Cu/l deg. C mg Ni/l pH Unit %SO4 w/ g/ml
704722	3916 PENWALT 949 STR	Chloride pH Value Phenols Specific Gravity	<0.01 1.71 57087 1.070	% w/w C pH Unit ug/g g/ml
704723	3918 CEE BEE A805	Aluminum Hexavalent Chromi Fluoride (elec.) Nitrate Nitrogen	<0.01	mg Al/l % w/w % F w/w % HNO3



ATRACE, INC RIDER TRAIL NORTH an CITY. MO 63045 PROJECT # 1005-01

CLIENT: McDONNELL DOUGLAS

DATE: 04-20-87

SITE I.D.	LAB #	SAMP.DATE	PARAMETER	CONC.	UNITS	DATE ANALY.
4726	AA00564	04/08/87	SPECIFIC GRAVITY	1.0212	g/cc at 4 C	04/13/87
., 20			SILVER	⟨3	ug/l	04/16/87
			CADMIUM	19.2	mg/l	04/16/87
			LEAD	0.42	mg/1	04/16/87
			ARSENIC	10.4 (2)	mg/l	04/16/87
			SELENIUM	5.6 (2)	mg/l	04/16/87
			BARIUM	<0.005	mg/l	04/16/87
			CHROMIUM	0.2	mg/l	04/16/87
			LINDANE	< 0.83	ug/l	04/16/87
			ENDRIN	< 2.5	ug/l	04/16/87
			METHOXYCHLOR	< 4.2	ug/l	04/16/87
			TOXAPHENE	< 4.2	ug/l	04/16/87
			2,4-0	⟨ 5	ug/l	04/15/87
			2,4,5-TP	< 2	ug/l	04/15/87
			ρH	3.1	pH units	04/14/87
			FLASHPOINT	27.8	degrees cent.	04/14/87
			BROMINE	not analyzed	insuff. sample	
			MERCURY	not analyzed	insuff. sample	
842						
4727	AA00565	04/08/87	SPECIFIC GRAVITY	1.2492	g/cc at 4 C	
			pH	0.0	pH units	
**			PHENOL	19,960	mg/l	04/17/87
2			ORGANIC CHLORIDES	107.9	mg/l	04/17/87

Colorimetric hexavalent chromium procedure not applicable to these samples due to interference from matrix (ie dark color). Total chromium analysis will be ran, when possible, but will result in increased detection limits due to large dilutions.

Insufficient sample to reanalyze by graphite furnace method, high values may be due to emission problems during ICP analysis.

caTRACE, INC .15 RIDER TRAIL NORTH -EARTH CITY, MO 63045

PROJECT: 1005-01

CLIENT: McDONNELL DOUGLAS

DATE: 05/01/87

AR01370	SITE I.	D.	LAB #	SAMPLE DATE	PARAMETER	CONC.	UNITS	DATE ANALY.	ANALYST	STANE METHC
105/21/87 FLASH POINT CO degrees C CO CO CO CO CO CO CO	4765	(4996)	AA01370	05/21/87	SPECIFIC GRAVITY	0.811	€ 4 degrees C	05/24/97	P C	217
10 10 10 10 10 10 10 10				05/21/87	FLASH POINT					101
AFF Company APP	4766	(4996)	AA01371		SPECIFIC GRAVITY	0.831	€ 4 dearees C	05/26/87	P. G.	217.
10 10 10 10 10 10 10 10				05/21/87	FLASH POINT	<0				
AFFER Company Application Company Co	4767	(4996)	AA01372		SPECIFIC SRAVITY	0.884	@ 4 degrees C	05/26/97	2.6.	217
PH 7.64			•	05/21/87	FLASH POINT	<0				
PH	4763	(4994)	AA01373	05/21/87	SPECIFIC GRAVITY	1.002	@ 4 degrees C	05/26/87	P.S.	213
TITANIUM					•	7.64				
CHROMIUM 238 ag/1 06/01/87 E.C. 30 4769 (4896) AA01374 05/21/87 SPECIFIC GRAVITY 1.004 9 4 degrees C 05/26/87 P.3. 213		(#)			TITANIUM	₹.050	mg/l			
APPS AA01374 OS/21/87 SPECIFIC GRAVITY 1.004 Stage of the		9				238	ag/l			
PH PN PN PN PN PN PN PN					SODIUM HYDROXIDE	0.22	% by WST NaOH			
### P.91 pH units 05/27/87 D.K. 42 ####################################	4769	(4996)	AA01374	05/21/37	SPECIFIC GRAVITY	1.004	9 4 degrees C	05/26/87	P.G.	217
ALUMINUM .700 ag/1 06/01/87 5.1. 30 CMRCMIUM .210 ag/1 06/01/87 6.1. 30 4770 (4996) AA01375 05/21/87 SPECIFIC SRAVITY 1.1583 @ 4 degrees C 05/26/87 F.S. 213 PH 4.50 PH units 05/27/67 D.K. 42 ALUMINUM 1.06 ag/1 06/01/97 G.L. 30 CHROMIUM .986 ag/1 06/01/87 G.L. 30 SULFURIC AGID 13.81 % WET H2S04 06/01/97 G.L. 30 SULFURIC AGID 13.81 % WET H2S04 06/01/97 G.L. 30 4771 (4996) AA01376 05/21/87 SPECIFIC GRAVITY 1.033 @ 4 degrees C 05/26/87 P.G. 213 PH 0.88 pH units 05/27/87 D.K. 42 PHENDL MATRIX NOT APPLICABLE TO METHOD ORGANIC CHLORIDES .0072 % NGT CI(-) 05/27/87 B.T. 40 4772 (4996) AA01377 05/21/87 SPECIFIC GRAVITY 1.021 @ 4 degrees C 05/26/87 P.G. 213 PH 1.48 PH units 05/27/87 D.K. 42 CHROMIUM 2.54 ag/1 06/01/97 G.L. 30 SULFIDES MATRIX NOT APPLICABLE TO METHOD INDRGANIC NITRATES .0008 % NGT NO3(-) 05/27/87 B.T. EPA 3- PHOSPHATES .028 % NGT NO3(-) 05/27/87 B.T. EPA 3- PHOSPHATES .028 % NGT PO4(-3) 06/01/97 G.L. 30 SULFIDES MATRIX NOT APPLICABLE TO METHOD					дH	9.91	pH units			
### CHRCHICP	32	19			ALUNINUM	.700	mg/l			
### ### ##############################	3.				CHROMIUM	.210	mg/l			
## 4.50 pH units 05/27/67 D.K. 42 ALUMINUM 1.06 ag/1 06/01/87 G.L. 30 CHROMIUM .986 ag/1 06/01/87 G.L. 30 SULFURIC AGID 13.81 % WST H2SQ4 06/01/87 G.L. 30 ### 0.88 pH units 05/27/87 D.K. 42 PHENDL MATRIX NOT APPLICABLE TO METHOD DRGANIC CHLORIDES .0072 % MGT CI(-) 05/27/87 B.T. 40 ###################################	4770	(4994)	AA01375	05/21/87	SPECIFIC SRAVITY	1.1583	@ 4 degraes C	05/28/87	F.S.	213
ALUMINUM 1.06 ag/1 06/01/97 G.L. 30 CHROMIUM .986 ag/1 06/01/87 G.L. 30 SULFURIC AGID 13.81 % WST H2S94 06/01/87 G.L. 30 SULFURIC AGID 13.81 % WST H2S94 06/01/87 G.L. 30 FEED AGID 13.81 % WST H2S94 06/01/87 G.L. 30 PH 0.88 pH units 05/27/87 D.K. 42 PHENDL MATRIX NOT APPLICABLE TO METHOD ORGANIC CHLORIDES .0072 % MST C1(-) 05/27/87 B.T. 40 PH 1.48 pH units 05/27/87 D.K. 42 CHROMIUM 2.54 ag/1 06/01/97 G.L. 30 SULFIDES MATRIX NOT APPLICABLE TO METHOD INORGANIC NITRATES .0005 % MST NOT APPLICABLE TO METHOD INORGANIC NITRATES .0005 % MST NOT APPLICABLE TO METHOD INORGANIC NITRATES .0005 % MST NOT APPLICABLE TO METHOD INORGANIC NITRATES .0005 % MST NOT APPLICABLE TO METHOD INORGANIC NITRATES .0005 % MST NOT APPLICABLE TO METHOD INORGANIC NITRATES .0005 % MST NOT APPLICABLE TO METHOD INORGANIC NITRATES .0005 % MST NOT APPLICABLE TO METHOD INDRESSED .028 % MST PO4(-3) 06/01/97 G.L. 30 PHOSPHATES .03 P					рН	4.50	pH units			
SULFURIC ACID 13.81 % WST H2S04 06/01/87 S.L. 30 4771 (4996) AA01376 05/21/87 SPECIFIC BRAVITY 1.033 & 4 degrees C 05/26/87 P.E. 213 PH 0.88 PH units 05/27/87 D.K. 42 PHENDL MATRIX NOT APPLICABLE TO METHOD 05/27/87 B.T. 40 4772 (4996) AA01377 05/21/87 SPECIFIC GRAVITY 1.021 & 4 degrees C 05/26/87 P.E. 2134 PH 1.48 PH units 05/27/87 D.K. 42 CHROMIUM 2.54 mg/1 06/01/97 G.L. 304 SULFIDES MATRIX NOT APPLICABLE TO METHOD 05/27/87 B.T. EPA 3 PHOSPHATES .0008 % WGT NO3(-) 05/27/87 B.T. EPA 3 PHOSPHATES .028 % WGT PO4(-3) 06/01/97 G.L. 301					ALUMINUM	1.04	ag/l			
SULFURIC ACID 13.81 % WST H2S04 06/01/87 S.L. 30 4771 (4996) AA01376 05/21/87 SPECIFIC BRAVITY 1.033 & 4 degrees C 05/26/87 P.E. 213 PH 0.88 PH units 05/27/87 D.K. 42 PHENDL MATRIX NOT APPLICABLE TO METHOD 05/27/87 B.T. 40 4772 (4996) AA01377 05/21/87 SPECIFIC GRAVITY 1.021 & 4 degrees C 05/26/87 P.E. 2134 PH 1.48 PH units 05/27/87 D.K. 42 CHROMIUM 2.54 mg/1 06/01/97 G.L. 304 SULFIDES MATRIX NOT APPLICABLE TO METHOD 05/27/87 B.T. EPA 3 PHOSPHATES .0008 % WGT NO3(-) 05/27/87 B.T. EPA 3 PHOSPHATES .028 % WGT PO4(-3) 06/01/97 G.L. 301				Α.	CHROMIUM	. 785	mg/l			
PH					SULFURIC ACID	13.81	% WST H2S04			
PH 0.88 pH units 05/27/87 D.K. 42 PHENDL MATRIX NOT APPLICABLE TO METHOD DRGANIC CHLDRIDES .0072 % WGT Cl(-) 05/27/87 B.T. 40 4772 (4996) AA01377 05/21/87 SPECIFIC GRAVITY 1.021 @ 4 degrees C 05/26/87 P.G. 2138 pH 1.48 pH units 05/27/87 D.K. 42 CHROMIUM 2.54 mg/l 06/01/97 G.L. 308 SULFIDES MATRIX NOT APPLICABLE TO METHOD INORGANIC NITRATES .0005 % WGT NO3(-) 05/27/87 B.T. EPA 3-PHOSPHATES .028 % WGT PO4(-3) 06/01/87 G.L. 308	(177)									
PHENDL MATRIX NOT APPLICABLE TO METHOD ORGANIC CHLORIDES .0072 % WGT C1(-) 05/27/87 B.T. 40 4772 (4996) AA01377 05/21/87 SPECIFIC GRAVITY 1.021 @ 4 degrees C 05/26/87 P.G. 2131 pH 1.48 pH units 05/27/87 D.K. 421 CHROMIUM 2.54 mg/1 06/01/97 G.L. 301 SULFIDES MATRIX NOT APPLICABLE TO METHOD INORGANIC NITRATES .0005 % WGT NO3(-) 05/27/87 B.T. EPA 3-PHOSPHATES .028 % WGT PO4(-3) 06/01/87 G.L. 301	4//1	(4775)	AA01576	05/21/87	the state of the s			05/26/87	P.6.	213
ORGANIC CHLORIDES .0072 % WET C1(-) 05/27/87 B.T. 40 4772 (4996) AA01377 05/21/87 SPECIFIC GRAVITY 1.021 @ 4 degrees C 05/26/87 P.G. 2131 pH 1.48 pH units 05/27/87 D.K. 421 CHROMIUM 2.54 mg/1 06/01/97 G.L. 301 SULFIDES MATRIX NOT APPLICABLE TO METHOD INORGANIC NITRATES .0008 % WET NO3(-) 05/27/87 B.T. EPA 3-PHOSPHATES .028 % WET PO4(-3) 06/01/87 G.L. 301					•			05/27/87	D.K.	42
4772 (4996) AA01377 05/21/87 SPECIFIC GRAVITY 1.021 @ 4 degrees C 05/26/87 P.G. 2131 pH 1.48 pH units 05/27/87 D.K. 421 CHROMIUM 2.54 mg/l 06/01/97 G.L. 301 SULFIDES MATRIX NOT APPLICABLE TO METHOD INORGANIC NITRATES .0005 % WGT NO3(-) 05/27/87 B.T. EPA 3-PHOSPHATES .028 % WGT PO4(-3) 06/01/87 G.L. 301										
PH 1.48 pH units 05/27/87 D.K. 421 CHROMIUM 2.54 mg/l 06/01/97 G.L. 301 SULFIDES MATRIX NOT APPLICABLE TO METHOD INDRGANIC NITRATES .0005 % WGT NO3(-) 05/27/87 B.T. EPA 3- PHOSPHATES .028 % WGT PO4(-3) 06/01/87 G.L. 301					ORGANIC CHLORIDES	.0072	% WST C1(-)	05/27/87	B.T.	40
CHROMIUM 2.54 mg/l 06/01/97 G.L. 301 SULFIDES MATRIX NOT APPLICABLE TO METHOD INORGANIC NITRATES .0005 % WGT NO3(-) 05/27/87 B.T. EPA 3 PHOSPHATES .028 % WGT PO4(-3) 06/01/87 G.L. 301	4772	(4996)	AA01377	05/21/87				05/26/87	۶.6.	213
SULFIDES MATRIX NOT APPLICABLE TO METHOD INORGANIC NITRATES .0005 % WGT NO3(-) 05/27/87 B.T. EPA 3/ PHOSPHATES .028 % WGT PO4(-3) 06/01/87 G.L. 30'							pH units	05/27/87	Đ.K.	427
INORGANIC NITRATES .0005 % WGT NO3(-) 05/27/87 B.T. EPA 3/ PHOSPHATES .02B % WGT PO4(-3) 06/01/87 G.L. 30/								06/01/97	6.L.	301
PHOSPHATES .028 % W6T P04(-3) 06/01/87 G.L. 30'										(+ - +)
PHILENTES AND MARKET TO A										EPA 3
SULFATES .085 % WGT 504(-2) 05/27/87 E.T. EPA 3										301
					SULFATES	.095	% WGT 504(-2)	05/27/87	E.T.	EPA 3

Cure XI. Lyington

section E Composition		
Composition: List all the hazard all other major com	lous components of ponents by weight	the waste and the concentration. List percentages.
Major Components	(wt.5)	Extraction Procedure Concentration (ppm)
Organic Halides	208-508	
Bydrocarbons	501-801	
ı		
i		
5.		
i		
2. Appearance and Odor: C]. 3. Solubility in water 4. Specific gravity (H ₂ 0-1) 5. Vapor density (Air-1)	18 7. 1.25 6. 9.	S by weight of volatiles at 600°C Boiling Point (°C)
6. I by weight of volatiles at	100°C	
Section G - Fire and Explosion (
2. Extinguish Hedia a d	7 dry chemical, 7 water fog,	by - Nortens closed cup taster ASTM std. N std. D-1278-73 bCO ₂ , calcohol foam, ewater Spray.
Does not apply		
Section H - Health Hazard Data		
1. Effects of over exposure	Anesthetic	, irritating, suffocating
2. Emergency and First Aid pro	cedure Flum	

from Missouri wastestream registration Chlorinated Solvents (F001, F002)

Section 1			140.00
Reactivity Data:			
. 1		Condi	tions to avoid
1. Stability Stab	10 X		
2. Incompatibility (materials to avoid) 3. Hazardous Play Occur Risy Not Occur X Section J Spill or Leak Procedures: Contain and recover Steps to be taken in case material is released Section K Special Protection Information: 1. Respiratory Protection (specific type) Chlorinated solvent 2. Protective gloves Rubber or PVC 3. Eye Protection Pace shield 4. Special Clothing (specify type) Rubber or PVC 5. Precentions to be taken in handling and storing 6. Other Precautions 7. 24-hour emergency phone number (314) 232-0232 Section L Containerization: Specify appropriate DOF containers, labels and placards required for transpiration.			
	May Occur		Conditions to seem
POTYMETYZETON		*	<u> </u>
Section J			
Spill or Leak Procedure	es:	Contain	and recover
Steps to be taken in c	ase material is	released	
Section K			
Special Protection Inf	formation:		
1. Respiratory Protect	tion (specific	type)	Chlorinated solvent
2. Protective gloves			Rubber or PVC
3. Eye Protection			Pace shield
4. Special Clothing	(specify type)		Rubber or PVC
5. Preceutions to be	taken in handl	ing and stor	ing
6. Other Precautions	1		
7. 24-hour emergency	phone number		(314) 232-0232
Reactivity Data: 1. Stability Stable X 2. Incompatibility (materials to avoid) 3. Mazardows Polymerization Pay Not Occur X Section J Spill or Leak Procedures: Contain and recover Steps to be taken in case material is released Section K Special Protection Information: 1. Respiratory Protection (specific type) Chlorinated solvent 2. Protective gloves Rubber or PVC 3. Eye Protection 4. Special Clothing (specify type) Rubber or PVC 5. Precentions to be taken in handling and storing 6. Other Precentions 7. 24-hour emergency phone number (314) 232-0232 Section L Footsingrization:			
Containerization:			
Specify appropriate	DOT containers.	labels and	placards required for transportation.
Used 17E drum	ns		

(6)

Environmental Analysis, Inc.

3278 N. Lindbergh Blvd. · Florissant, MO 63033 · 314-921-4488



MCDONNELL-DOUGLAS

PAGE NO :

22838

REPORT NO :

DATE : 10/10/86

RESULTS OF ANALYSIS

17	٠	u	0	۳.	•	_		\sim	٠.			1 4	-	•	_	•	_	
_	_	_			_		_	_		_	_	_	 _			_		

LOG NUMBER	SAMPLE DESCRIPTION	TEST NAME	RESULTS OF ANALYSIS	UNITS OF EXPRESSION
712101.	4803 041 CHL SOLV	Silver Arsenic Residue @ Barium BTU Cadmium Cyanide	1.4 6640 0.860 0.63	mg Ag/l mg As/l % w/w mg Ba/l BTU/lb mg Cd/l ug CN/g
		Reactive C Chromium EP TOXICIT EP Silver EP Arsenic EP Barium EP Cadmium EP Chromiu EP Mercury EP Lead EP Seleniu Flash Poin	28.6 261.24 <0.005 0.021 0.254 0.036 0.77 <0.002 2.00 0.060	ug CN/g mg Cr/l Meth.No mg Ag/l mg As/l mg Ba/l mg Cd/l mg Cr/l mg Hg/l mg Se/l deg. C mg Hg/l
		Organic Ch Lead pH Value Phenols Sulfides (Sulfides (Selenium Specific G Total Meta Total Soli Volatiles Volatiles Zinc	10ride 9.12 15.5 9.31 626 (dist.) 40.3 (React.) <10 0.090 6 6 7 7 6 1 156 6 1 1 156 6 1 1 1 1 1 1 1 1	% w/w mg Pb/l pH Unit ug/g ug S/g ug S/g mg Se/l g/ml % w/w % w/w % w/w % w/w mg Zn/l



me...aACE, INC 13715 RIDER TRAIL NORTH EARTH CITY. MO 63045 PROJECT # 1005-01

CLIENT: McDONNELL DOUGLAS

DATE: 05/11/87

SITE I.D.	LAB #	SAMP.DATE	PARAMETER	CONC.	UNITS	DATE ANALY.	ANALYST	STANDARD METHOD
4728	AA00765	04/22/87	SPECIFIC GRAVITY	1.313			W.G.	213E
			FLASHPOINT	(0	DEGREES C	04/30/87	J.S.	1010
4729	AA00766	04/22/87	SPECIFIC GRAVITY	1.117	at 4 degrees (04/30/87	₩.G.	213E
275	100		FLASHPOINT	17	DEGREES C	04/30/87	J.S.	1010
4730	AA00767	04/22/87	SPECIFIC GRAVITY	1.013	at 4 degrees (04/30/87	₩.G.	213E
			FLASHPOINT	(0)	DEGREES C	04/30/87	J.S.	1010
4731	AA00768	04/22/87	SPECIFIC GRAVITY	1.448	at 4 degrees (04/30/87	W.G.	213E
			FLASHPOINT	9	DEGREES C	04/30/87	J.S.	1010
4732	AA00769	04/22/87	SPECIFIC GRAVITY	1.093	at 4 degrees (04/30/87	W.G.	213E
X 25 25 17			FLASHPOINT	15	DEGREES C	<u>/</u> 04/30/87	J.S.	1010
4733	AA00770	04/22/87	SPECIFIC GRAVITY	1.449	at 4 degrees (04/30/87	₩.6.	213E
No.			FLASHPOINT	36	DEGREES C) 04/30/87	J.S.	1010
4734	AA00771	04/22/87	SPECIFIC GRAVITY	1.310	at 4 degrees	04/30/87	W.G.	213E
	e _e		FLASHPOINT	34	DEGREES C	04/30/87	J.S.	1010
4735	AA00772	04/22/87	SPECIFIC GRAVITY	1.011	at 4 degrees	04/30/87	₩.G.	213E
			FLASHPOINT	(0	DEGREES C	04/30/67	J.S.	1010
4736	AA00773	04/22/87	SPECIFIC GRAVITY	.845	at 4 degrees (C 04/30/87	W.G.	213E
			FLASHPOINT	₹0	DEGREES C	05/05/67	J.S.	1010
4737	AA00774	04/22/87	SPECIFIC GRAVITY	.846	at 4 degrees	C 04/30/87	W.G.	213E
			FLASHPOINT	(0)	DEGREES C	05/05/87	J.S.	1010
4738	AA00775	04/22/87	SPECIFIC GRAVITY	.964	at 4 degrees	C 04/30/87	W.G.	213E
			FLASHPOINT	32	DEGREES C	05/05/67	J.S.	1010
4739	AA00776	04/22/87	SPECIFIC GRAVITY	.810	at 4 degrees	C 04/30/87	W.G.	213E
			FLASHPOINT	⟨0	DEGREES C	05/05/87	J.S.	1010
4744	AA00777	04/22/87	SPECIFIC GRAVITY	.897	at 4 degrees	C 04/30/87	W.G.	213E
			FLASHFOINT	54	DEGREES C	05/05/87	J.S.	1010

position: List all the l	mazardous component or components by we	s of the waste (ight percentage)	ind the concentration ;.	
	(wt.%)		Procedure Concentrat	lon (ppm)
Mixed Solven		:		
Water				
	7			
G ²	(V)			
Physical State (Circle Appearance and Odor:	One): Solid Si		Liquid Compress	
Solubility in water			of volatiles at 600	
Specific gravity (H20-	1)		int (-c)	
Vapor density (Air-1)		9. pH		
I by weight of volatil				
ction G - Fire and Emplo	sion Data			
flashpoint (circle end D-93-77 or setaflash o	. if applicable) - losed tester method	Pensky - Harten I ASIH std. D-32	s closed cup tester / 78-73C <] 4	ISTN 61d. PF
Extinguish Hedia a.	X dry chemical	D. (X)	ug, c. <u></u>	HOI TURN,
	X water fog,		ater spray.	
ection H - Health Hazard	Data			
. Effects of over expo	iure			
. Emergency and First A	ld procedure Flt	ısh skin ar	d eves with w	ater

from Missouri wastestream registration Flammable Solvents (D001, F003, F005)

teas t	lvity Data:					
		Unstable	1		Condi	tions to avoid
1. :	Stability	Stable	х		Exc	essive heat
2.	Incompatibili	ty (mater	lais to avo	14)	Spa	rks or open flame
3.	Hazardous Polymerizatio	n Ha	y Occur y Not Occur			Conditions to avoid
Sect	ion J					
	i or Leak Pro	cedures:				
Step	s to be taken	in case	material is	rele	ased	0,
			nd recov			/4
Sect	ion K	9				
Spec	ial Protection	on Inform	ations			3
1.	Respiratory I	Protectio	n (specific	type)	Organic solvent vapor
2.	Protective g	loves				Rubber or PVC
3.	Eye Protecti	on				Face shield
4.	Special Clot	hing (spe	clfy type)			** • •
5.	Precautions	to be tal	ken in handi	ing a	nd stor	ring
	Handle a	as a f	lammab le	110	quid	
6.	Other Precau	it lons				
7.	24-hour emen	rgency ph	one number	(314)	232-0232
Se	ction L					
Co	ntainerizatio	n:			1- and	placerds required for transportation.
Sp	ecify appropr	late DOT	containers,	labe	is and	placards required for transportation.
	Used 178	E Drum	s - Flam	mab	le Li	iquid, Flammable

Environmental Analysis, Inc.

3278 N. Lindbergh Blvd. · Florissant, MO 63033 · 314-921-4488



MCDONNELL-DOUGLAS

PAGE NO : REPORT NO : 22559

DATE: 09/17/86

RES	JL	TS	OF	ANAL	YS	IS
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LOG NUMBER	SAMPLE DESCRIPTI	ON	TEST NAME	RESULTS OF ANALYSIS	UNITS OF EXPRESSION
2		~~	Cilver	<0.050	mg Ag/l
712033	4802 043 FLAM.	SULV	Silver	0.105	mg As/l
			Arsenic	0.27	% w/w
			Residue @ 600 C	13.3	mg Ba/l
			Barium	12625	BTU/1b
			BTU	0.190	mg Cd/l
			Cadmium	0.34	ug CN/c
			Cyanide		ug CN/c
			Reactive Cyanid	46.0	mg Cr/l
			Chromium	261.24	Meth.Nc
			EP TOXICITY	<0.050	mg Ag/l
			EP Silver	0.047	mg As/l
			EP Arsenic EP Barium	1.23	mg Ba/l
2	w.		EP Cadmium	<0.005	mg Cd/l
			EP Chromium	3.01	mg Cr/l
				<0.002	mg Hg/l
			EP Mercury EP Lead	0.020	mg Pb/l
			EP Selenium	<0.005	mg Se/l
			Flash Point (PM		deg. C
			Mercury	< 0. 020	mg Hg/l
			Lead	24.7	mg Pb/l
			pH Value	6.70	pH Unit
			Phenols	593	ug/g
			Sulfides (dist.		u g S/g
			Sulfides (React		ug S/g
			Selenium	0.080	mg̃ Se∕∷
			Specific Gravit		g/ml
			Total Metals Pr	,	⊶r
			Total Solids	89.02	% w/w
			Volatiles @ 100		% w/w
			Volatiles @ 600		% w/w
			Zinc	1.64	mg Zn/
			£ 111.	an H turn 1	



caTRACE, INC .15 RIDER TRAIL NORTH -EARTH CITY, MD 63045

PROJECT: 1005-01

CLIENT: McDONNELL DOUGLAS

DATE: 05/01/87

									STANE
SITE I.D.		LAB #	SAMPLE DATE	PARAMETER	CONC.	UNITS	DATE ANALY.	ANALYST	METHC
			05/21/87	SPECIFIC GRAVITY	0.811	e 4 degrees C	05/26/87	P.G.	213
4765	(4996)	AA01370	05/21/87	FLASH POINT	(0	degrees C	06/01/87	J.C.	101
			25 104 107	SPECIFIC GRAVITY	0.831	€ 4 degrees C	05/26/87	2.6.	213
4766	(4996)	AA01371	05/21/87 05/21/8 7	FLASH POINT		degrees C	06/01/87	J.C.	101
			05/31/07	SPECIFIC GRAVITY	0.884	@ 4 degrees C	05/26/97	P.G.	213
4767	(4996)	AA01372	05/21/87 05/21/87	FLASH POINT	(0	degrees C	06/01/87	J.C.	101
			AE /21 /07	SPECIFIC GRAVITY	1.002	€ 4 degrees C	05/26/87	P.S.	213
4763	(4994)	AA01373	05/21/87	pH		pH units	05/27/87	Đ.K.	42
				TITANIUM	<.050	mg/I	06/01/87	G.L.	20
				CHROMIUM	238	ang/l	06/01/87	G.L.	30
190				SODIUM HYDROXIDE	0.22	% by WST NaOH	06/01/87	G.L.	20
				ALTERNA DEALLITY	4 004	9 4 degrees C	05/25/87	2.6.	213
4769	(4996)	AA01374	05/21/97	SPECIFIC GRAVITY	1.004 9.91	pH units	05/27/87	D.K.	42
				<u> </u>	.700	mg/I	06/01/87	8.L.	30
n ₂ ,				ALUMINUM CHROMIUM	.210	mg/l	05/01/87	G.L.	30
4770				SPECIFIC ERAVITY	1.1583	@ 4 degraes C	05/26/87	P.S.	213
4770	(4995)	AA01375	05/21/87			pH units	05/27/87	D.K.	42
				pH ALUMINUM		mg/l	06/01/97	G.L.	36
			\$V	CHROMIUM	.986	mg/l	06/01/87	8.1.	30
				SULFURIC ACID	13.81	% W6T H2S94	06/01/27	3.L.	30
						0.4	05/26/87	P.G.	213
4771	(4995)	AA01576	05/21/87	SPECIFIC GRAVITY	1.033	€ 4 degrees C	05/27/87	D.K.	42
				∘ pH	0.69	pH units	03121101	20	025
				PHENOL		APPLICABLE TO METHOD	05/27/87	8.7.	40
				ORGANIC CHLORIDES	.0072	% MET CI(-)	03/2//0/	2.0	
				SPECIFIC GRAVITY	1.021	@ 4 degrees C	05/26/87	P.S.	2131
4772	(4994)	AA01377	05/21/87	PH PH		pH units	05/27/87	D.K.	42
				CHROMIUM	2.54	sg/l	05/01/87	6.L.	30!
				SULFIDES	MATRIX NOT	APPLICABLE TO METHOD			
				INORGANIC NITRATES	.0005	% WGT ND3(-)	05/27/87		EPA 3
				PHOSPHATES	.028	% WGT PO4(-3)	06/01/87	3.1.	30'
				SULFATES	.095	% WGT SG4(-2)-	05/27/87	E.T.	EFA 3

Curt XI. Byington

FOR ALL MISSOURI-DESTINED

SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program

P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2000-Gauss. Expires 7-31-26 1. Generator's US EPA ID No. **UNIFORM HAZARDOUS** 2. Page Information in the shaded areas Document No. **WASTE MANIFEST** M O D O O O S 1 1 8 9 5 5 0 0 0 0 4 is required by State law 3. Generator's Name and Mailing Address MCDONNELL DOUGLAS CORPORATION - ST. LOUIS P.O. BOX 516, ST. LOUIS, MISSOURI 63166 ers ID"- ether 4. Generator's Phone (314) 232-3319 5. Transporter 1 Company Name 6. US EPA ID Number WO. Transporters 10 MCDONNELL DOUGLAS CORPORATION resporter's Phone MIDIDICIOLOLBETE 7 Transporter 2 Company Name 8. US EPA ID Number 6 Transporter's 10 NONE F, Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA 1D Number G State Feolity's IB MCDONNELL DOUGLAS CORPORATION 140 MCDONNELL BOULEVARD H. Facility's Phone ST. LOUIS COUNTY, MISSOURI M, O, D, O, O, O, 8, 1, 3, 9 (314) 232-6 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 12. Containers 13. Total Unit Quantity Wt/Vo WASTE FLAMMABLE LIQUID, N.O.S. FLAMMABLE LIQUID UN1993 0.0,1,1 G ENER HAZARDOUS WASTE, SOLID, N.O.S. ORM-E NA9189 A 0 HAZARDOUS WASTE, LIQUID, N.O.S. R ORM-E NA9189 J. Additional Descriptions for Materials Listed Above K. Handling Godes for W Mammable Solvent Painting Debrie Waste Oil 15. Special Handling Instructions and Additional Information "IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY, RETURN TO GENERATOR." 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Printed/Typed Name Signature Month Day Year COLLOVGH 1119 17. Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name Day Signature 19. Discrepancy Indication Space C 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. L Date T Printed/Typed Name Month Day LU Dalas Wanda EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-8300 DEPT OF NATURAL RESOURCES 314-834-2438

Ple	ase print or type (Form designed : if use on elite (12-pitch)	typewriter)			Form Approved. OA	MB No. 2000-0404. Expires 7-31-86
	UNIFORM HAZARDOUS	1. Generator's US EPA ID No.	Manifest 9 2 2 Bocument	2. Page	informa	ation in the shaded areas
П	WASTE MANIFEST	M O DO O O 8 1 8	9 2 2 6 6 6	7 P of _	is requi	ired by State law.
	3. Generator's Name and Mailing Address MCDONNELL DOUGLAS CORPORA P.O. BOX 516, ST. LOUIS, 4. Generator's Phone (314) 232-3319				un Maxifest Deour 2 2 5 12 Cenerators III - e	61 01 21 3
П	5. Transporter 1 Company Name	6. US EPA ID	Number .	D 2007	Invisporacy 10	
11	MCDONNELL DOUGLAS CORPORA		0 0 3 1 8 9 6	3 D Trests	STITUTE DISCOLU	
	7. Transporter 2 Company Name	8. US EPA ID	Number	E-MO-1	rahaporter's ID	A STATE OF THE STA
	NONE	1			Stor's Phone A	
	9. Designated Facility Name and Site Address	10. US EPA II	Number		Facility's JD	
	MCDONNELL DOUGLAS CORPORA 140 MCDONNELL BOULEVARD ST. LOUIS COUNTY, MISSOUR			M_Facilit	y's Phone	
	11. US DOT Description (Including Proper Shipping Name		12 00	ntainers	13.	14.
			12. 33		Total Guantity	Unit Wasta No.
	a.			-	Quantity	MO.
GE	HAZARDOUS WASTE, SOLID, N ORM-E NA9189	.0.S.	0,0	1 CM	0,0,0,0,5	Y Cities DO07
N	WASTE ORM-A, N.O.S.		100 - 1			0 4 6
E	ORM-A NA1693		100	2 DM	0,0,1,1,0	G Other
A	C.	3 M	ctee	2 2,11	0,0,7,7,0	F001
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R				. 1 . 1		Other
	d.				****	MO.
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	I Additional Descriptions for Materials Listed Above		和大学的意思	K Handi	ng Crades for Waste	s Listed Above
	· Painting Debris				1 1 1	
	o Chlorinated Solvent			1		
		. 0			1 1 1	11111
	15. Special Handling Instructions and Additional Information		化品温度 与原始的			I I'M File
	15. Special Filling Walted and Additional Millionian	ч				
	"IF UNABLE TO DELIVER TO	DESIGNATED TSD FA	CILITY, RETURN	TO GEN	TERATOR."	
	16. GENERATOR'S CERTIFICATION: I hereby declare that t	ne contents of this consignment are fu	illy and accurately described ab	ove by propers	hipping name and ar	e classified, packed, marked, and
	labeled, and are in all respects in proper condition for tr Unless I am a small quantity generator who has been exe	ansport by highway according to app	olicable international and natio	nal governmen	t regulations and ap	plicable state regulations.
	have a program in place to reduce the volume and toxicit or disposal currently available to me which minimizes th	of waste generated to the degree I ha	ive determined to be economic	ally practicable	and I have selected t	the method of treatment, storage,
	Printed/Typed Name	Signat		1		Month Day Year
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Ţ	17. Transporter 1 Acknowledgement of Receipt of Materials			-0		Date
A	Printed/Typed Name	Signat	ure) (enu	PA		Month Day Year
SP	Rodepick H. CAll	4WAL/	od such I	lall.	lan	172 1780
Ö	18. Transporter 2 Acknowledgement of Receipt of Materials			- A.S		Date
TRANSPORTER	Printed/Typed Name	Signat	ure			Month Day Year
R						
_	19. Discrepancy Indication Space					
F A						
C			19-13-E 11-25			
L	20. Facility Owner or Operator: Certification of receipt of ha	zardous materials covered by this m	anifest except as noted in Item	19.		
T			-			Date
Υ	Printed/Typed Name	Signat	die.	MODE CO.	1	Month Day Year
ED A	Form 8700-22 (Rev. 4-85), MDNR-HWG 10	157 M. C	"MINIC	n L	(ker/ot)	12 17 26

3HIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program

P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

Ple	ase print or type (Form designed ' r use on elite (12-pitch)	typewriter.)		Form Approved. OMB No	2000-0404. Expires 7-31-86
A	UNIFORM HAZARDOUS	1. Generator's US EPA ID No.	Manifest Document No.	2. Page Information	in the shaded areas
Ш	WASTE MANIFEST	8 1 8 0 0 0 0 0 M	9 7 1 10 000 0 30 4	of is required t	
	3. Generator's Name and Mailing Address			A. Missouri Manifest Document !	
	MCDONNELL DOUGLAS CORPORA	ATION - ST. LOUIS		美国建筑的	第1000年1月1日
	P.O. BOX 516, ST. LOUIS,			B 1 1 2 5 1 1	0 10 13 14
	4. Generator's Phone (314) 232-3316				
	5. Transporter 1 Company Name	6. US EPA ID I	Number	G. MO. Transporter's ID	39 0
	MCDONTELL DOUGLAS CORPORA		0,0,3,1,3,9,6,3		
11	7. Transporter 2 Company Name	8. US EPA ID I	And the second of the second o		PART 7335-8357
П		0. 03 EFA 10 1	1	E MO. Trapaporter's ID	*
	NONE 9. Designated Facility Name and Site Address	40.415.504.15	A15-114	F. Transporture Philine	NA SKE AND
		10. US EPA ID	Number	G. State Facility's 10	
	MCDONNELL DOUGLAS CORPORA	ATION .		and the same of the same	COPY
	140 MCDOWNELL BOULEVARD			et Pacility's Phone	0
	BT. LOUIS COUNTY, MISSOUR	$M_1O_1D_1O_1$	0 0 3 1 3 9 5 3	(314) 232-096	
Н	11. US DOT Description (Including Proper Shipping Name	e, Hazard Class, and ID Number)	12. Containe	ers 13. 14. Total Uni	t J. Washis No.
П				Quantity Wt/V	ol. Z
	a.				
	WASTE FLAMMABLE LIQUID, 1				0 14 1 3 4
G	FLAMMABLE LIQUID UN199	93	0 0 2	DM 0.0.1.1.0 G	mm3
E	b.				MO SENERATOR
E	WASTE EMULSFFIED CUTTING	OIL	L L		91317 W
R	(NOT D.O.T. REGULATED)		0, 0, 1	TP 01350 G	Other Z
A	c.		- Italiania	9000	MO. C
0		<u>B</u>	mckee		
R		_	-1, C.		Other
Ш	d.				MO
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	J. Additional Descriptions for Materials Listed Above			K. Handling Codes for Waster List	
	a. Additional Descriptions (Uranitations Cisted Above	The state of the s		R. Handling Codes for Wastes List	SE ADOVA
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	(C)				
	distribution of the second	是一个一个一个一个一个		A. A. C. A. 1.	RETURN FROM
8	15. Special Handling Instructions and Additional Informati	on .		• Author to the feeder from the committee of the feeder to a committee of the feeder to	ITS
	"IF UNABLE TO DELIVER TO	DESIGNATED TSD FA	CILITY, RETURN T	O GENERATOR."	= =
Ш		¥1	3000		E
	16. GENERATOR'S CERTIFICATION: I hereby declare that	the contents of this consignment are full	y and accurately described about h	ny acanacching in a name and are also	eified english marked and
Ш	labeled, and are in all respects in proper condition for t	ransport by highway according to appl	icable international and national g	overnment regulations and applicat	ole state regulations.
	Unless I am a small quantity generator who has been ext	empted by statute or regulation from the	duty to make a waste minimization	certification under Section 3002(b)	of RCRA, I also certify that I
	have a program in place to reduce the volume and toxici or disposal currently available to me which minimizes t	ty of waste generated to the degree i have he present and future threat to hu ma n l	re determined to be economically pi health and the environment.	racticable and I have selected the me	ethod of treatment, storage,
1	Brigted/Typed Name	Signaty	re LAU BERTHIOF	H-DUAN-H VOU	of RCRA, I also certify that I although of treatment, storage, Month Day Year
V	THATED (DILES	E.	chared to me		11.21.98.4 5
T	17. Transporter 1 Acknowledgement of Receipt of Material	s	/ / 0		Date H
A	Printed/Typed Name	Signatu	re /		Month Day Year
A N S	MAN) MANH	· \\	1/2		1 1 1 1 1 1 1 1 1 1 1 1
PO	19. Transporter 2 Approvided company of Page int of Material		-1811 11 112		
l R	18. Transporter 2 Acknowledgement of Receipt of Material Printed/Typed Name	Signatu	ro.		Date Vear Vear
T E R	· ····································	Jagnatu			Month Day Year
Н					
_	19. Discrepancy Indication Space				COPY MUST BE
FA					LS TS
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[]	20. Facility Owner or Operator: Certification of receipt of h	szardous materials covered by this may	nifest except as noted in Item 10		
L	23.1. 25 S. G. Operator, Certification of receipt of fi	materials covered by this mal	micot except as noted in item 19.		
Ť	Printed/Typed Name	Signatu	re		Month Day Year
Υ		Signatu	75 75 2	A	Month Day Year
EPA	Form 8700-22 (Rev. 4-85) MDNR-HWG 10	- loc	- John James		100 44 46
	- GIRL GLOUTEE (LIGH. TOU) MIDNIN-THYO IU		Z C		

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT OF NATURAL RESOURCES 314-634-2436

	lease print or type (Form designed for use on elite (12-pitch)	typewrite:.)			Form Approved. O	MB No. 2	2000-0404. Expires 7-31-86	i
A	UNIFORM HAZARDOUS	Generator's US EPA ID No.	Man fest	2 Page			the shaded areas	1
1	WASTE MANIFEST	цорооз1,89716	ochweuî No?	5 of	7 1		State law.	
	3. Generator's Name and Mailing Address				souri Manifest Docu	_		1
	MCDONNELL DOUGLAS CORPORA	PTUOT TO MOTT						
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	P.O. BOX 516, ST. LOUIS,	1112200KT 02100		B. Stat	e Generator's ID -	other	混乱转物型的路	
	4. Generator's Phone (314) 232-3319			1000	ALL THE THE X	Z.		
	5. Transporter 1 Company Name	6. US EPA ID Number		C MO.	Transporter's 1D	7.70	20-11-11-11	
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		1		-	Transporter's ID	A STATE OF	FRED LE	A
П	9. Designated Facility Name and Site Address		111		sporter's Phone		10.3%	۵
П	MCDONNELL DOUGLAS CORPORA	10. US EPA ID Number		G. Stat	e Facility's ID	7597	A. 电影影响	
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	ST. LOUIS COUNTY, MISSOUR	RI MODOO81	8 9 6 3	5.00	(314) 232	006		COPY
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	the same and the s	The second of the second of the second		K. Hand	iling Codes for Wast	es Listed	Above	-
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	"IF UNABLE TO DELIVER TO	DESIGNATED TSD FACILITY, RI	ETURN T	O CE	HERATOR."			ER ITS RETURN FROM
	16. GENERATOR'S CERTIFICATION I hereby deciare that t	he contents of this consignment are fully and accurately de-	scribi d above l		th pound name and a	ro o 2001	and probed marked and	FTER ITS REI
	16. GENERATOR'S CERTIFICATION I hereby deciare that t labeled, and are in all respects in proper condition for tr	he contents of this consignment are fully and accurately de- ansport by highway according to applicable international	scribi diabove b	overnme	sh pping name and a	pl cable	state regulations.	AFTER
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OR ALL MISSOURI-DESTINED

SHIPMENTS

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102

314-751-3241

U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed : r use on elite (12-pitch) typewriter.) Form Approved, OMB No. 2000-0404, Expires 7-31-86 UNIFORM HAZARDOUS 1. Generator's US EPA ID No. Manifest 2. Page _ Information in the shaded areas M, O, D, O, O, O, S, 1, S, 9, 2, 2|0 Document No. WASTE MANIFEST is required by State law 3. Generator's Name and Mailing Address A. Missouri Manifest Document, Number 1 2 51 2 MCDONNELL DOUGLAS CORPORATION - ST. LOUIS P.O. BOX 516, ST. LOUIS, MISSOURI 63166 B. State Generator's ID - other 4. Generator's Phone (314) "红"是一些"走"。 232-3319 5. Transporter 1 Company Name 6. US EPA ID Number C.MO. Transporters ID . H-1039 MCDONNIELL DOUGLAS CORPORATION MODOOGELS D. Transporter's Phone ... (314) .232-9327 9 7. Transporter 2 Company Name E.MO. Transporter SID 8. US EPA ID Number NONE F2 Transporteris Phone 9. Designated Facility Name and Site Address G-State Fecility's ID 10. US EPA ID Number MCDONNELL DOUGLAS CORPORATION MARIE PAR 140 MCDONNELL BOULEVARD H. Facility's Phone 1 ST. LOUIS COUNTY, MISSOURI (314) 232 M O D O O O 8 1 8 9 6 3 0960 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 13. Total I. Waste No. Quantity Wt/Vol WASTE ORM-A, N.O.S. Other G ORM-A NA1593 F FOOT N Ď Ε HAZARDOUS WASTE, SOLID, N.O.S. R Other NA9189 C. M D007 Т B Mckee 0 R Other MO. Othe-J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above Methylene Chloride Painting Debris d 15. Special Handling Instructions and Additional Information "IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY, RETURN TO GENERATOR." 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of F.CRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health ago the environment. Printed/Typed Name Signature Month Day Year OHN TRANSPORTER 17. Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Day Month Year 20 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day 19. Discrepancy Indication Space AC 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. T Date Printed/Typed Name Signature EPA Form 8700-22 (Rev 4-85) MDNR-HWG

RETURN ITS AFTER GENERATOR 出出 B∀ RETAINED BE MUST THIS COPY N INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

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CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCES
314-634-2436

HAZARDOUS WASTE MANIFEST

ease print or type (Form designed for use on eille (12-pite	ch) typewriter.)			_	Form A	pproved. Of	/В No. 2	2000-0404. Expires 7-31-8
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20. Facility Owner or Operator: Certification of receipt of	of hazardous materials	covered by this manife	st except as noted	in Item 19.				-11-12-12-1
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N FROM GENERATOR FINAL COPY — PART 2

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TSDF.

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE
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Please print or type (Form designed : if use on elite (12-pite	h) typewriter.)	110.025%	Form Approved 6	SMS N. SOCIETA
MUNIFORM HAZARDOUS	1. Generator's US EPA ID No.	Manifest 2		DMB No. 2000-0404. Expires 7-31-86 mation in the shaded areas
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P.O. BOX 516, ST. LOUIS,	MICCOURT COLC	<u>A</u>	0 4 2 11	7 0 0 0 1 2
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	4	C	MO. Transporter's ID	H-1039
MCDONNELL DOUGLAS CORPOR			Transporter's Phone	-(314) 232-9327
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NOTE 9. Designated Facility Name and Site Address			. Transporter's Phone	
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MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality

Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102

HAZARDOUS WASTE MANIFEST

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UNIFORM HAZARDOUS		10.551.15.11				Form Approved. O	MB No.	2000-0404. Expires 7-31-
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UNIFORM HAZARDOUS 1. Generator's US EPA ID No. WASTE MANIFEST M O D O O 8 1 8 9 7 1 0 Generator's Name and Mailing Address	Manifest Document No. 0 0 3		einform	ation i	2000-0404 Expires 7-31- the shaded areas State law.
MCDONNELL DOUGLAS CORPORATION — ST. LOUIS P.O. BOX 516, ST. LOUIS, MISSOURI 63166 Generator's Phone (314) 232-3319		0	Souri Manifest Document 1 2 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1		mber 0 1 3 8
Transporter 1 Company Name MCDONNELL DOUGLAS CORPORATION M O D O O O 8 1 Transporter 2 Company Name NONE 6. US EPA ID Number 8. US EPA ID Number	8 9 6 3	D. Trai	Transporter's ID)39 () 232–9327
Designated Facility Name and Site Address MCDONNELL DOUGLAS CORPORATION 140 MCDONNELL BOULEVARD ST. LOUIS COUNTY, MISSOURI M O D O O 8 1	8,9,6,3	G Stat	isporter's Phone e Facility's ID Diy's Phone	นา นาย เ	3060
. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Contair	ners	13 Total Quantity	14. Unit Wt/Vol.	LaWaste No.
RQ WASTE FLAMMABLE LIQUID, N.O.S. FLAMMABLE LIQUID UN1993 (F005,FB03, D001)		D ₁ M	0.0.0.5.5		MO A 3
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WASTE SULFURIC ACID, SPENT CORROSIVE MATERIAL UN1832		D F	DIOI 90 6	G	Other DOC2
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Special Handling instructions and Additional information "IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY, R					Argument Argument
GENERATOR'S CERTIFICATION. I hereby declare that the contents of this consignment are fully and accurately deabeled, and are in all respects in proper condition for transport by highway according to applicable international unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a was a program in place to reduce the volume and toxicity of waste generated to the degree have determined to be disposal currently available to me which minimizes the present and the rethreat to the content and the environment of the content and the conten	te minimization	overnme	nt regulations and app	olicable	state regulations.
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Facility Owner or Operator' Certification of receipt of hazardous materials covered by this man fest except as not	ed in Item 19.				
Printed Typed Name Signature TETTYR, Master T. M.					Date Month Day Year

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT, OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2000-0404. Expires 7-31-86 1. Generator's US EPA ID No. **UNIFORM HAZARDOUS** Manifest 2. Page _ Information in the shaded areas M O D 9 8 0 9 6 8 4 5 7 is required by State law **WASTE MANIFEST** of 3. Generator's Name and Mailing Address MCDONNELL DOUGLAS CORPORATION - ST. LOUIS P.O. BOX 516, ST. LOUIS, MISSOURI 63166 4. Generator's Phone (314) 232-3319 5. Transporter 1 Company Name 6. US EPA ID Number C. MG. Transporter's 15 MIOIDIOIOIOI81131 O. Transporter's Prione MCDONNELL DOUGLAS CORPORATION - PART 8. US EPA ID Number 7. Transporter 2 Company Name È MO. Transporter's IB F. Transportac's Phone NONE 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID MCDONNELL DOUGLAS CORPORATION 140 MCDONITELL BOULEVARD H. Facility's Phone MODO0081 8 ST. LOUIS COUNTY, MISSOURI 0965 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 12. Containers 13. Total 14. Unit Wt/Vol Quantity a. RO WASTE FLAMMABLE LIQUID, N.O.S. (F005, F003, D001) UN1993 FLAMMABLE LIQUID G E b. Ν Ε C. 0 d. J. Additional Descriptions for Materials Listed Above RO = 100b d, 15. Special Handling Instructions and Additional Information "IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY, RETURN TO GENERATOR." 16. GENERATOR'S CERTIFICATION. I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment Month Signature Printed/Typed Name t Date 17. Transporter 1 Acknowledgement of Receipt of Materials Day Printed/Typed Name Signature Month Year FIR Date ORTER 18. Transporter 2 Acknowledgement of Receipt of Materials Signature Month Day Printed/Typed Name 19. Discrepancy Indication Space Α C 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date Day Printed/Typed Name Signature Month -1117

IS COPY MUST BE

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8602
CHEM TREC
1-800-422-9300
DEPT OF NATURAL RESOURCES
314-634-2436

GENERATOR FINAL COPY — PART THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TSDF.

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MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality

Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL PESOURCES
314-634-2436

GENERATOR FINAL COPY — PART 2

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TSDF.

Please p	rint or type (Form designed : r use on elite (12-pitc	h) typewriter.)					Form Approved, O	MB No.	2000-0404 Expires 7-31-8
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3. 0	Generator's Name and Mailing Address	1.1.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	12.14	217114	-			
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4.0	Generator's Phone (314) 232-3319		*	571				14 年 年	
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MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-800
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCES
314-634-2436

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MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102

314-751-3241

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HAZARDOUS WASTE MANIFEST

Ple	se print or type (Form designed : ; use on elite (12-pite	h) typewriter.)			Form	Approved: C	MB No. 2	2000-0404 Expires 7-31-86
A	UNIFORM HAZARDOUS	1. Generator's US EPA ID I	Vo	Manifest	2. Page			the shaded areas
17	WASTE MANIFEST	M,O,D,9,3,0,	3 5 9 5 1 5 P	J. J	of	is requ	uired by	State law.
	Generator's Name and Mailing Address				A. Missouri Ma	-		
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	P.O. BOX 516, ST. LOU	S. MISSOURI 6	3166		B. State Gener		other	0 10 12 14
	4. Generator's Phone (314) 232-3319				D. Grand Goriel	4013 10	Other	
	5. Transporter 1 Company Name		EPA ID Number		\$250 Ext.			使用是理解的
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	7. Transporter 2 Company Name	8. US	EPA ID Number		E. MO. Transp	orter's ID		Salaria ava
	TOHE				F. Transporter	Phone		
	9. Designated Facility Name and Site Address MCDONNELL DOUGLAS CORI		S EPA ID Number		G. State Facilit	y's ID		
$ \cdot $								
	140 MCDONNELL BOULEVAR				H. Facility's Ph	one	ikidi e i	A CAMPAGNA AND A STATE
	ST. LOUIS COUNTY, MISS	OURI M) D 0 0 0 8 1 3	5 9 6 3		(314)	232-	0960
П	11. US DOT Description (Including Proper Shipping Na	ne, Hazard Class, and ID Numi	ber)	12. Containe		13.	14.	IN CALL DE LA PRESENTA
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	b	- 100 H	THE RESERVE AT LOSS OF	1000			5,52	ACCUPATION OF STREET
	c. ED - Karphanett Street St. St. St. St.	Sale and the sale of		A TENNES	ess. In spore			
	d .				25	9-1		
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			D 22 15					
	"IF UNABLE TO DELIVER	TO DESIGNATED	TSD FACILITY,	RETURN	TO GIN	ERATOR	- 6 11	
	16. GENERATOR'S CERTIFICATION I hereby declare in	at the contents of this consignment	ent are fully and accurately des	cribed above b	y proper shippin	g name and a	ere classifi	ied, packed, marked, and
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	or disposal currently available to the which minimizes	the present and future threat t	o human health and the enviro	onment.	action bic aria it	·	tile metal	od or treatment, storage,
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H	20. Facility Owner or Operator: Certification of receipt of	hazardous materials coursed b	w this manifest assess as =	d in Ham 40				
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Ţ	Printed Typed Name		Signature					Date
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MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

HAZARDOUS WASTE MANIFEST

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S RETURN FROM GEN R TOR FINAL COPY -- PART 2

Please p	rint or type (Form designed for use on elite (12-pitch)	typewriter.)			Form	Approved O	MB No. 20	00-0404. Expires 7-31-86
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11.	P.O. BOX 516, ST. LOUIS,	MISSOURI	63166		B. State Gene	rator's ID - c	other	
4. 0	Generator's Phone (314) 232-3319	`.						
5. 7	ransporter 1 Company Name		6. US EPA ID Number		C. MO. Transp	orter's ID H	-1039	
	MCDONNELL DOUGLAS CORPORA	TALL TUP	MI OLD LOLO OLO 31	1 8 9 6 6				232-9327
7. T	ransporter 2 Company Name	24.24.24	8. US EPA ID Number	1 1 1 1	E MO. Transp		314)	
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9 [Designated Facility Name and Site Address				F. Transporter	113		FAMILUAL TE
	MCDONNELL DOUGLAS CORPORA	TET ON	10. US EPA ID Number		G State Facili	ly's ID		
		TITOM			Property.	- 5 / 25/11		
	140 MCDONNELL BOULEVARD	-	222 ·		H. Facility's Ph	none	WELL Y	STANDARDS IN
	ST. LOUIS COUNTY, MISSOUR	RI.	M, O, D, O, O, O, 8,	1 4 9 6 1	12	14) 23	000	
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C.	Gutting Oil				1 1 1 1 1 1 1	T 1		
ď	Alkaline Sludge			AMERICA SERVICE		vote:		
1 15.5	Special Handling Instructions and Additional Informatio	in					1	
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	"IF UNABLE TO DELIVER TO	DESIGNATE	D TSD FAGILITY,	RETURN 1	ro GENER	ATOR."		
16. 0	GENERATOR'S CERTIFICATION hereby declare that ti	he contents of this co	nsignment are fully and accurately	described above b	ov proper shippin	o name and a	re classifie	d packed marked and
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31 PMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program

P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSI U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed : r use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2000-0404. Expires 7-31-86 1. Generator's US EPA ID No. UNIFORM HAZARDOUS 2. Page Information in the shaded areas Document No. WASTE MANIFEST T '6' 6' 6' 6' 6' 6' 1 is required by State law. 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number 1 2 5 3 MCDORNELL DOUGLAS CORPORATION - ST. LOUIS P.O. BOX 516, ST. LOUIS, MISSOURI 63166 B. State Generator's ID - other 4. Generator's Phone (31,4) 232-3319 3 4 2 5. Transporter 1 Company Name 6. US EPA ID Number C. MO. Transporter's ID .H-1039 MCDOWNELL DOUGLAS CORPORATION MIGIDIO, 0: 0: 8: 1: 8: 9: D. Transporter's Phone - (314) 232-9327 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID MCDONNELL DOUGLAS CORPORATION 140 MCDOWNELL BOULEVARD H. Facility's Phone ST. LOUIS COUNTY, MISSOURI M.O.D.O.O.O.S. ő (314) 232-0960 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 12. Containers Total Unit I. Waste No. Quantity Wt/Vol MO WASTE SODIUM HYDROXIDE SOLUTION Other G CORROSIVE MATERIAL UN1824 D002 .90 2D M 0002 Ε RO = 100 LBS.Ε RQ WASTE FLAMMABLE LIQUID, N.C.S. 0 1 Other F005, F003, D001 FLANMABLE LIOUID UN1993 D M 010055 G רחחת 0 HAZARDOUS WASTE, LIQUID, N.O.S. R Other ロ風の図のあること MO. Otne: J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above Sodium Hydroxide Flammable Liquid 1 Waste Oil 15 Special Handling Instructions and Additional Information "IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY, RETURN TO GENERATOR." 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Printed/Typed Name Month Dav NET 451,9 17. Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day Hopso 18. Transporter 2 Acknowledgement of Receipt of Materials ORTER Date Signature Day Month 19. Discrepancy Indication Space F A 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. 1 T Printed/Typed Name Month Day

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HAZARDOUS WASTE MANIFEST

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lease print or type (Form designed : , r use on elite (12-pitch			Form Approved. O	MB No. 2000-0404, Expires 7-31-86
UNIFORM HAZARDOUS	1. Generator's US EPA ID No.	Manifest 2. F Document No.		nation in the shaded areas
WASTE MANIFEST	14 O D O O O O 3 1 8 9 O 60	0 2 0 3	of is requ	ired by State law.
3. Generator's Name and Mailing Address		A.*	Missouri Manifest Docu	ment Number
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P.O. BOX 516, ST. LOUIS.		8.1	State Generator's ID - o	other
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William Control of the Control of th	7			
MCDCNIELL DOUGLAS CORPORE 7. Transporter 2 Company Name	ATION			
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NOME		L L L F.M	rensporter's Phone -	
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MCDONNELL DOUGLAS CORPORA	ALLON			
140 MCDONNELL BOULEVARD		Ĥ. I	acility's Phone	
ST. LOUIS COUNTY, MISSOUR		. 8, 9, 6, 3	(014) 23	2 0060
11. US DOT Description (Including Proper Shipping Nam (E) Was H. OR M-A, N.C	e, Hazard Class, and ID Number)	12. Containers	13.	14.
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16. GENERATOR'S CERTIFICATION: I hereby declare that labelled, and are in all respects in proper condition for	the contents of this consignment are fully and accurately transport by highway according to applicable internation	described above by pri nal and national gover	oper shipping name and a	policable state regulations
Unless I am a small quantity generator who has been ex-	empted by statute or regulation from the duty to make a w	aste minimization cort	fication under Section 20	202/b) of BCBA Later continues at
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UNIFORM HAZARDOUS 1. Generator's US FPA ID No. Information in the shaded areas O o O Document No. 1,0,D,0,0,0,3,1,8,9 **WASTE MANIFEST** is required by State law 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number McDonnell Douglas Corporation - St. Louis 0 11 12 14 18 PO Box 516 St. Louis, Mo. 63166 B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 5. Transporter 1 Company Name 6. US EPA ID Number H-1039 C. MO. Transporter's ID [A, O, D, O, O, O, S, L, S, 9, McDonnell Douglas Corporation D. Transporter's Phone (314) 232-9327 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID - McDonnell Douglas Corporation 140 McDonnell Boulevard H. Facility's Phone MO, D, O, O, O, 8, 1, 3, 9, 6, 3 (314) 232-0960 St. Louis County, Mo. 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Total Unit I. Waste No. Quantity Wt/Val Waste corrosive liquid, N.O.S. 0 Corrosive Material UN1760 Other G クロのら」 F002 b. NE Waste Sulfuric Acid, Spent UN1332 Corrosive Material R 0 Dit D002 MO 0 Waste Sodium Hydroxide Solution Other Corrosive Material UN1824 D002 DN D002 d. 0 Waste Corrosive Solid, N.O.S. Corrosive Material UN1759 D002 D002 J. Additional Descriptions for Materials Listed Above ... K. Handling Codes for Wastes Listed Above Methylene Chloride - Phenol - Formic Acid Sulfuric Acid Sodium Hydroxide Acid Sludge - 1 "If unable to deliver to designated TSD facility, return to generator." AFTER 16. GENERATOR'S CERTIFICATION. Thereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I GENERATOR have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Printed/Typed Name Month Day 0,6 41 TRAZSPORTER 17. Transporter 1 Acknowledgement of Receipt of Materials BY THE Date Signature Day COPY MUST BE RETAINED TSDF. 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name . Signature Day Month Year 19. Discrepancy Indication Space F A 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. TY Printed/Typed Name Signature Nionth Day CW R

SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 . CHEM TREC 1-800-424-9300

DEPT, OF NATURAL RESOURCES 314-634-2436

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed in use on elite (12-pitch) typewriter) Form Approved. OMB No. 2000-0404, Expires 7-31-86 UNIFORM HAZARDOUS 1. Generator's US EPA ID No. Manifest Information in the shaded areas 2. Page 1 **WASTE MANIFEST** M, 0, D, 0, 0, 0, 3, 1, 3, 9of _ is required by State law 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number McDonnell Douglas Corporation - St. Louis 1,2,5,1 3000 PO Box 516 St. Louis, Mo. 63166 B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 5. Transporter 1 Company Name 6. US EPA ID Number C. MO. Transporter's ID H = 1039 M_O_D_O_O_O_8_1_8 9 6 3 McDonnell Douglas Corporation D Transporter's Phone (314) 232-9327 7. Transporter 2 Company Name E. MO Transporter's ID none F. Transporter's Phone 9 Designated Facility Name and Site Address 10. US EPA ID Number G State Facility's ID McDonnell Douglas Corporation TAL Z 140 McDonnell Boulevard H, Facility's Phone St. Louis County, Mo. M₀D₀D₀0₀8,1₈9,6₃ (314) 32 0960 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 13. 14. Unit Total RO Maste Planmeble Liquid. N. C. S 0 4 13 Flammable Liquid UN1993 (F005, 7003, D601) Other G DOOL Ε N Hazardous Waste, Liquid, N. O. S. G 0 E NA9189 R Other 0 0 DM 2011110 N/A A 934 T 0 R Other MO. J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Shove RO = 100:1bs. b. Wastewoll 141 15. Special Handling Instructions and Additional Information "If unable to deliver to designated TSD facility, return to generator," 16. GENERATOR'S CERTIFICATION. I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified packed, marked and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations Unless I am a small quantity generator who has been exempted by statute ogregulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage for disposal currently available to me which minimizes the present and future threat to human health and the environment. Printed/Typed Name Month . Day -Year NETTE 17: Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name AZWOORLER Day Month Transporter Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day 19. Discrepancy Indication Space F C 20 Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date T Printed/Typed Name Signat re Day S Month

EPA Form 87 0-22 Rev 4 5 MDNR-HWG 10

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

Please print or type (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program

P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

1. Generator's US EPA ID No.

EMERGENCY RESPONSE
U.S. COAST GUARD
1-807-47-902
CHEM TREC
1-800-422-9300
DEPT. OF NATURAL RESOURCES
314-634-2436

Form Approved, OMB No. 2000-0404, Expires 7-31-86

HAZARDOUS WASTE MANIFEST

Manifest

GENERATOR FINAL COPY — PART 2

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS DETURN FROM THE TSDF.

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MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality

Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT OF NATURAL RESOURCES
314-634-2436

HAZARDOUS WASTE MANIFEST

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UNIFORM HAZARDOUS 1. Generat	tor's US EPA ID No.	Manifest Document No.	2. Page	Inform	nation in	the shaded areas	ŝ
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3. Generator's Name and Mailing Address			A. Missouri	Manifest Docu	ment Nu	mber	
McDonnell Douglas Corporation P.O. Box 516, St. Louis, Misso 4 Generator's Phone (314) 232-3319	- St. Louis curi 63166		O I / I B State Ge	nerator's ID -	7 other	010121	3
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St. Louis County Missouri		<u>૧૫</u>		(314)	232-0	960	
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J Additional Descriptions for Materials Listed Above		1 1	1 1	1 1 1			-
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INSTRUCTIONS FOR THE COMPLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3176

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

Plea	se print or type (Form designed for use on elite (12-pitch) type	ewriter.)		Form Approved. C	DMB No. 2050-0039, Expires 9-30-83
A	OITH OTHER INCOME.	Generator's US EPA ID No. 1 O D O O O 8 1 8 9 7 1		2. Page Inform	nation in the shaded areas uired by State law.
П	3. Generator's Name and Mailing Address			The second second second	
	McDonnell Douglas Corporat P.O. Box 516, St. Louis, M 4. Generator's Phone (314) 232-3319			A. Missouri Menifest Docu O 1 2 5 1 B. State Generator's ID -	1 0 0 14 17
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	7. Transporter 2 Company Name	8. US EPA ID Number	- 1	E. MO. Transporter's ID	1425 (1235) (155) (150) (150) (150)
	None			F. Transporter's Phone	
	9. Designated Facility Name and Site Address McDonnell Douglas Corporat 140 McPonnell Boulevard	10. US EPA ID Number		G. State Facility's ID H. Facility's Phone	
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Ñ	Printed Typed Name	Signature	11.4		Month Day Year
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Ř	18. Transporter 2 Acknowledgement of Receipt of Materials	I di		e i i	Date
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ACIL	20. Facility Owner or Operator: Certification of receipt of hazar	dous materials covered by this manifest except	as noted in Item 19.		
ACILIT			as noted in Item 19.		Date
ACILI	20. Facility Owner or Operator: Certification of receipt of hazar Printed/Typed Name	rdous materials covered by this manifest except	as noted in Item 19.		Date Month Day Year

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED

Please print or type (Form designed for use on elite (12-pitch) typewriter.)

SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3176

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300

DEPT. OF NATURAL RESOURCES 314-634-2436

Form Approved. OMB No. 2050-0039, Expires 9-30-88

1. Generator's US EPA ID No. UNIFORM HAZARDOUS Information in the shaded areas MOD00081392 WASTE MANIFEST is required by State law 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number McDonnell Douglas Corporation - St. Louis 11 12 15 1 10 P.O. Box 516, St. Louis, Missouri 63166 B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 5. Transporter 1 Company Name H-1039 6. US EPA ID Number C. MO. Transporter's ID N McDonnell Douglas Corporation M M D O O O S 1 8 9 6 3 D. Transporter's Phone 232-9327 PART (314) 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID None F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID McDonnell Douglas Corporation COPY 140 McDonnell Boulevard H. Facility's Phone (314) 232-0960 St. Louis County, Missouri 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number, GENERATOR FINAL 13 Unit Total I. Waste No. Quantity MO. Waste Sodium Hydroxide Solution 0 Corrosive Material D GENERATO WHISTE ORDING WIE MO R Other d MO. J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above AFTER ITS RETURN FROM b. C. 15. Special Handling Instructions and Additional Information "If unable to deliver to designated TSD facility, return to generator. 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. GENERATOR If I am a large quantity operator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method available to me that I can afford Day Year 2818 COPY MUST BE RETAINED BY THE 17. Transporter 1 Acknowledgement of Receipt of Materials TRANSPORTER Date Printed/Typed Name Signature Day Month 542837 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Signature Day Month 19. Discrepancy Indication Space F A C 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. 1 Т Printed/Typed Name Signature Day Month

INSTRUCTIONS FOR THE COMPLETION OF THIS FORM ARE ON A SEPARATE SHEET.

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EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8502
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCES
314-634-2436

HAZARDOUS WASTE MANIFEST

	UNIFORM HAZARDOUS	1. Generator's US	S EPA ID No.	Manifest Document No.	2. Page	Informa	ation in	the shaded areas
	WASTE MANIFEST	וחופוחוים	010181112101015	210131310	of _	is requ	ired by	State law.
Ī	. Generator's Name and Mailing Address				A: Misso	uri Manifest Docum	nent Nu	mber
1	McDonnell Douglas Corpora	tion - St	. Louis		0 1	2 4 8		0 2 2 0
	P.O. Box 516, St. Louis,	Missouri	63166 and		D Ctate	Generator's ID - o	15.75	
1	Generator's Phone (314) 232-3319				D. State	Generators ID - 0	rner	
- L				3				Ballet Core Mile
1	. Transporter 1 Company Name		6. US EPA ID Number		C. MO.	Transporter's ID	H-10	139
l	McDonnell Douglas Corpora	trion	וא וחוח וחוח ומיוצי	1 - 2 - C - 6 - 2	D. Trans	and the second second second second second second	See of Control Lab) 232-9327
t	. Transporter 2 Company Name	L 4011	8. US EPA ID Number	1 - 1 - 1 - 1		Fransporter's ID	1314	1 432-9371
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ŀ	None			111		porter's Phone		
ľ	Designated Facility Name and Site Address		10. US EPA ID Number		G. State	Facility's ID		
	McDonnell Douglas Corpora	rion.						
	140 McDonnell Boulevard				H. Facili	ty's Phone	100	and the state of the call's
	St. Louis County, Missour	i	MODO08	1 8 9 6 3	0 HILLS		(314) 232-0960
L	US DOT Description (Including Proper Shipping Name		The second secon			AND THE RESERVE	HOSEVE	
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1	. Additional Descriptions for Materials Listed Above				K. Hand	ling Codes for Waste	s Listed	Above
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MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102

314-751-3176 HAZARDOUS WASTE MANIFEST EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300

DEPT. OF NATURAL RESOURCES 314-634-2436

Form Approved. OMB No. 2050-0039, Expires 9-30-£8

A	UNIFORM HAZARDOUS	1. Generator's US	EPA ID No.	Manifest	2. Page	Inform	nation in	the shaded areas	
T	WASTE MANIFEST	M, O, D, O, O	0,0,8,1,8;9,5	5 10 0 ment No.	7 of .	1 is requ	Jired by	State law.	
	3. Generator's Name and Mailing Address				THE OWNER WHEN	ouri Manifest Docu	ment Nu	imber	
	McDonnell Douglas Corpora	tion - St.	Louis					0,0,1,7	
	P:0. Box 516, St. Louis,				_	Generator's ID -	AND DESCRIPTIONS		
Ш	4. Generator's Phone (314) 232-3319				159/5179950		Other A	A STATE OF THE STA	
	5. Transporter 1 Company Name		6. US EPA ID Number		0.110		H-10	130	
	McDonnell Douglas Corpora	tion	1 M O D O O O	81896	3	Trensporter's ID	SOME STATE OF	1) 232-9327	8
	7. Transporter 2 Company Name		8. US EPA ID Number			sporter's Phone	(31-	1) 232-3321	PART
	None	•	6. US EPA ID NUMBER			Transporter's ID	2500V		AF
			للللل		10000000	sporter's Phone		"都是新年人"	0
П	9. Designated Facility Name and Site Address	te all man	10. US EPA ID Number		G. State	e Facility's ID			
	McDonnell Douglas Corpora	£ 70H							≻
	140 McDonnell Boulevard		***			lity's Phone		Section Library	COPY
	St. Louis County, Missour		M O D O O O	8 1 8 9 6	3	(314)	232-0	0960	ŏ
	11. US DOT Description (Including Proper Shipping Name	, Hazard Class, and	ID Number)	12. Contai	ners	13.	14.		-4
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Ř	Flammable Liquid UN199		5, F003, D001)	600	D M	1700	G	Other.	Ш
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O R	Hazardous Waste, Liquid,	4.0.5.		1601		~~ st		Other	
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	d.							MO.	
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8	Corrosave Material UNI	759 (DO	002)	104	D M	500	G	D002	
	J: Additional Descriptions for Materials Listed Above .				K Hand	ling Codes for Wast	es Listed	Above	
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	b. Flammable Solvent	11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			A AMERICAN	MANUAL TO LET STATE OF THE PERSON.	SPSS PARKET		H.
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	g Acid Sludge	9							Ē
	15. Special Handling Instructions and Additional Information		300 A 200 A				100		RETURN FROM
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	 have selected the practicable method of treatment, stora 	ge, or disposal curre	ntly available to me which m	inimizes the present an	d future th	reat to human health	and the e	environment, OR, if I am a	Ę
П	small quantity generator, I have made a good faith effor	to minimize my was		best waste manageme	ent method	d available to me tha	t I can af	ford.	H.
4	Printed/Typed Name		Signature	11.1	1.	16		Month Day Year	GENERATO
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AN	Printed/Typed Name	0 150	Signature	1)0		. 10		Month Day Year	E
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NE.	19. Discrepancy Indication Space				100				
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C									ğ
il	20. Facility Owner or Operator: Certification of receipt of hi	zardous materials c	overed by this manifest exce	ept as noted in Item 19					COPY MUST BE TSDF.
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Ţ	Printed/Typed Name	500000	Signature					Month Day Year	ΩĽ
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MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3176

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300

1-800-424-9300 DEPT. OF NATURAL RESOURCES 314-634-2436

Form Approved. OMB No. 2050-0039, Expires 9-30-83

A	UNIFORM HAZARDOUS	Generator's US EPA ID No.	Manifest Document No.	2. Page	Information in	the shaded areas
T	WASTE MANIFEST	9000000021131911		of	is required by	State law.
П	3. Generator's Name and Mailing Address			THE RESERVE AND ADDRESS OF THE PARTY.	nifest Document Nu	mber
П	McDonnell Douglas Corporat			0.1.2	1513	00 11 3
П	P.O. Box 515, St. Louis, M	issouri 63166		B. State Genera		00113
П	4. Generator's Phone (314) 232-3319		4	A DESCRIPTION OF THE PARTY OF T		
	5. Transporter 1 Company Name	6. US EPA ID Number		C. M.O. Transpo	prierie ID 31 3	220
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	McDonnell Douglas Corporat 7. Transporter 2 Company Name	ion MODO 000	0 1 0 1 1 1	E. MO. Transpo	727	4) 232-9327
	None					
	Designated Facility Name and Site Address	10. US EPA ID Number		F. Transporter's G. State Facility		A Chemical Comment
	McDonnell Douglas Corporat			G. State Facility	/ S 10	
-	140 McDonnell Boulevard			II Farmer De		
	St. Louis County, Missouri	M O D O O O	8 1 8 9 6 3	H. Facility's Pho		960
1				1	14) 232-0	The same of the sa
	11. US DOT Description (Including Proper Shipping Name	, Hazard Class, and ID Number)	12. Contain		13. 14. Fotal Unit	i. Waste No.
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	d.				=	MO.
	7=		1		,	000
					1	Other
	J. Additional Descriptions for Materials Listed Above			K. Handling God	les for Wastes Listed	Above
	a		4 (490)310313-0		170 Vol. 100	
	b				DESCRIPTION OF STREET PROPERTY.	
I	c.		5 (1) 上省海洋区外海		TO ALL HAROLING MICHAEL	
	d. (market and a second se					
	15. Special Handling Instructions and Additional Information	on.				
	"If unable to deliver to d	esignated TSD facility,	return to	generato	r."	9
	E 85.					
						fied, packed, marked, and
	16. GENERATOR'S CERTIFICATION: I hereby declare that to be labeled, and are in all respects in proper condition for tr					state regulations
	If I am a large quantity operator, I certify that I have a prog	ram in place to reduce the volume and toxicity of v	vaste generated to the de	egree I have detern	nined to be economic	ally practicable and that I
	have selected the practicable method of treatment, stora small quantity generator, I have made a good faith effor	ge, or disposal currently available to me which m t to minimize my waste generation and select the	inimizes the present and best waste manageme	future threat to hu nt method availab	uman health and the le to me that I can at	environment; OR, if Lam a
	Printed/Typed Name	Signature		1		Month Day Year
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T	17. Transporter 1 Acknowledgement of Receipt of Materials		7		8	
R	Printed/Typed Name	Signature	/ =	- 1		Date Month Day Year
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Ŗ	18. Transporter 2 Acknowledgement of Receipt of Materials 等, Printed/Typed Name	Signature \				Month Day Year
TEANSORT WE	Threat types teame	Signature				Month Day Year
н						
敬	19. Discrepancy Indication Space					
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A C						3
	20. Facility Owner or Operator: Certification of receipt of h	azardous materials covered by this manifest evo	ept as noted in Item 10			Date
Ī	, a application of receipt of the		-p. 20 110100 III NEIII 13.			Date
T	Printed/Typed Name	Signature				
ī	5 1114 (n	7/2		1		Month Day Year
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DEPT. OF NATURAL RESOURCES
3*4-634-2436

HAZARDOUS WASTE MANIFEST

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A	UNIFORM HAZARDOUS	Generator's US EPA ID No.	Manifest Document No.	2. Page?	Inform	ation in	the shaded areas	
TL	WASTE MANIFEST	MOD0008189	7 1 10 0 0 0 5 1	of	_ is requ	ired by	State law.	
3. G	Generator's Name and Mailing Address		7 12 3 3 3 3 3 3	NAME OF TAXABLE PARTY.	lanifest Docur			MI.
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11	McDonnell Douglas Corpora	ation - St. Louis		UILI	$\frac{2}{1}, \frac{5}{1}, \frac{1}{1}$		0 0 5 1	100
11	P.O. Box 516, St. Louis,	Missouri 63166		3. State Gene	erator's ID - o	ther		
4. G	Generator's Phone (314) 232-3319				UP WEEKS	ALC: N		100
5. T	ransporter 1 Company Name	6. US EPA ID Numb	er	C. MO. Trans	porter's ID TO	103	O Statistical Section	3591
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11.	US DOT Description (Including Proper Shipping Name	, Hazard Class, and ID Number)	12. Contain	ners	13.	14.	AND DESCRIPTION	
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SHIP TO MULTI

DATE

05/12/87

PAGE

CHANGE ORDER NO.

SIDS N

UM

PURCHASE ORDER

A68

MDC/SUPPLIER

QUANTITY

COND 0090

INTERNAL

GBS

1

TERMS:

N/30 ORIGIN

F. O. B. ROUTING SURFACE-SEE COND 4082

REFERENCE REO. NO. 744542

\$260000.00

P. O. TOTAL PLANNER B. E. MCKEE

CONTRACTOR TO PERFORM

WASTE OIL/SOLVENT REMOVE/DISPOSE*RW

PART NO /NOMENCLATURE/DESCRIPTION

SPECIAL NOTES

REFER TO LWD'S QUOTE DTD 6MAR87.

MISCELLANEOUS NON-RECURRING WASTE OIL/SOLVENT REMOVAL/DISPOSAL

REMOVAL AND DISPOSAL OF 55-GALLON DRUMS OF WASTE ACETONE, ALCOHOL, ALIPHATIC PETROLEUM NAPHTHA, AROMATIC PETROLEUM NAPHTHA, BENZENE, COAL AND FUEL OIL, DIMETHYL POLYSILOXANE, ENAMEL

PAINT, EPOXY PAINT, ETHYL ACETATE, ETHYLENE GLYCOL, FORMIC ACID WITH METHYLENE CHLORIDE, GASOLINE, HYDRAULIC OIL, HYDROFLUORIC ACID WITH METHYLENE CHLORIDE AND PHENOL, ION-EXCHANGE RESINS, JP-4 JET FUEL, JP-5 JET FUEL, KEROSENE, LACQUER THINNER, METHYLENE CHLORIDE, METHYL

ETHYL KETONE, METHYL ISOBUTYL KETONE, MOTOR OIL, NADIC METHYL ANHYDRIDE, NAPHTHA, PCB-CONTAMI-NATED LIQUID LESS THAN 50 PPM, PERCHLOROETHYLENE, PETROLEUM

POLYURETHANE PAINT, POTASSIUM HYDROXIDE WITH PHENOL, SODIUM

SOLIDS (ABSORBENT, RAGS, ETC.) CONTAMINATED WITH SOLVENT OR

BICARBONATE WITH PHENOL,

SOLVENTS, PHENOL, PHOSPHATE ESTER,

NOT TO EXCEED

LT

10 L. W. D., INC.

P.O. BOX 327 CALVERT CITY, KY

OF 10

53226-001

42029 ATTN: AMOS SHELTON

EXTENDED AMOUNT P. O. UNIT PRICE P. O. UM

MAC 877F3 (2 JUL 84)

ALL REFERENCES CONTAINED HEREIN TO MCAIR, MCAUTO, MDEC, MDAC-E, ETC., SHALL MEAN MCDONNELL DOUGLAS CORPORATION.

05/12/87

TERMS:

N/30 ORIGIN

F. O: B. ROUTING SURFACE-SEE COND 4082

REFERENCE REO. NO. 744542

P. O. TOTAL

\$260000.00

MDC/SUPPLIER QUANTITY

PURCHASE ORDER

INTERNAL

FM :

11

UM

SIDS N

PART NO./NOMENCLATURE/DESCRIPTION OIL, STODDARD SOLVENT, TAR, TECHNICAL DICHLOROMETHANE,

TOLUENE, TRANSMISSION OIL, TRICHLOROETHANE, TRICHLOROETHYLENE,

AND XYLENE.

ESTIMATED VOLUME IS 1600 55-GALLON

DRUMS PER YEAR.

ALL SHIPMENTS MUST BE DOCUMENTED WITH A HAZARDOUS WASTE MANIFEST. WITHIN TWO WEEKS AFTER RECEIPT OF THE WASTE AT THE DISPOSAL FACILITY, THE COMPLETED GENERATOR COPY OF THE HAZARDOUS WASTE MANIFEST SHALL BE RETURNED TO: ENVIRONMENTAL COMPLIANCE, DEPT. 891C, BLDG. 80, LEVEL 2, MCDONNELL DOUGLAS CORP., P.O. BOX 516, ST. LOUIS, MISSOURI 63166. HAULER SHALL HAVE A MISSOURI HAZARDOUS WASTE TRANSPORTER'S LICENSE.

VENDOR MUST PROVIDE ALL APPRO-PRIATE PERSONAL PROTECTIVE SAFETY EQUIPMENT FOR ALL VENDOR PERSONNEL WHILE ON MDC PREMISES.

PURCHASE ORDER NO. F74985C OF 10 2

CHANGE ORDER NO.

10: L. W. D., INC.

P.O. BOX 327 CALVERT CITY, KY

53226-001

42029

ATTN: AMOS SHELTON

P O UNIT PRICE

PAGE

P. O. UM

EXTENDED AMOUNT

- B - 5 - 18 -



LWD, INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

63166

MCDONNELL DOUGLAS CORFORATION ACCOUNTS FAYABLE DEPT. 042 F. O. BOX 516 ST. LOUIS, MO DATE:

11/17/86

TERMS:

DUE NET 30

AMOUNT DUE:

DESCRIPTION

	QUANTITY	TYPE	RATE AMOU	ŲΤ
MANIEEST + 00705 E-0.+ E62269C				
CB64 55 GALLON DRUMS	24.000	DRUMS		
CB63 55 GALLON DRUMS	24.000	DRUMS		
MANIFESI \$ QQ17Q CB64 55 GALLON DRUMS	9,000	DRUMS		
8.34 X SPEC. GRAV999 = 8.332#/GAL. X % CL 19.45 =				
1.62 X 55 GAL DRUM X 33				
☐ IRUMS = 2,940.3# CL ☐ CB64 SURCHARGE ON CHLORINATED MAT	2,940.300	POUNDS		
CB63 55 GALLON DRUMS	19,000	DRUMS		
CB65 55 GALLON DRUMS	3,000	DRUMS		
TRANSFORTATION BY LWD, INC.	200.000	MILES	TOTAL TOTAL	

OK Der Der 86

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 15%).

NSTRUCTIONS FOR THE COMPLETION OF THIS FORM ARE ON A BEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

4. Generator's Phone (314)

9. Designated Facility Name and Site Address

P.O. BOX 327, HWY. 1523

CALVERT CITY, KENTUCKY

NA1693

WASTE ORM-A, N.O.S.

5. Transporter 1 Company Name

LWD, INC. 7. Transporter 2 Company Name

LWD, INC.

ORM-A

GENERATO

R

NONE

Please print or type (Form designed 'at use on elite (12-pitch) typewriter.)

P.O. BOX 516, ST. LOUIS, MISSOURI

232-3319

42029

UNIFORM HAZARDOUS

WASTE MANIFEST 3. Generator's Name and Mailing Address

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE U.S. CJAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT: OF NATURAL RESOURCES 314-634-2436 Form Approved. OMB No. 2000-0404. Expires 7-31-86 Manifest Document No. 1. Generator's US EPA ID No. 2. Page ... Information in the shaded areas is required by State law M O D O O S animal Docum MCDONHELL DOUGLAS CORPORATION - SI. LOUIS 0 1 1 G.MO. Transportate ID. H. 1082 6. US EPA ID Number 3 881 7 - PART K,Y,D,C,3, 3 8. US EPA ID Number 10 US FPA ID Number GENERATOR FINAL COPY YD03B438817 4, 3, 8 8 1 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 13. Total 14. Unit 12. Containers Wt/Vol P 0 2

WASTE FLAMMABLE LIQUID, N.O.S. FLAMMABLE LIQUID UN1993	0, 2, 4 D M 1, 59,0,0	P POUS
c.		Other
d.		MO.
J. Additional Descriptions for Materials tilisted Above	K. Handling Codes for Waste	s Listed Above
a Chlorinated Solvent CB64		
b Flanmable Solvent CB63		
a. Net 31010	1 1 dod 24	
d.	1 1 100 10	
15. Special Handling Instructions and Additional Information		
"IF JNABLE TO DELIVER TO DESIGNATED TSD FACILITY, RE	TURN TO GENERATOR."	
KY-209		
16. GENERATOR'S CERTIFICATION. I hereby declare that the contents of this consignment are fully and accurately desclabeled, and are in all respects in proper condition for transport by highway according to applicable international a Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste.	and national government regulations and a e minimization certification under Section 30	pplicable state regulations. 002(b) of RCRA, I also certify that I

Onless ram a smarr quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of HCHA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment.

Signature

Signature.

Signature

Signature

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THIS

Day

Date

Day

Date

Day

Day

Month

Month

Month

1.1 13 Yea

A (0) 11. SHELFON EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

Printed/Typed Name

Printed/Typed Name

Printed/Typed Name

Printed/Typed Name

C

19. Discrepancy Indication Space

17. Transporter 1 Acknowledgement of Receipt of Materials

18 Transporter 2 Acknowledgement of Receipt of Materials

MISSOURI DEPARTMENT OF NATURAL RESOURCES

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS. Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8002 CHEM TREC 1-800-424-9300 DEPT OF NATUAL PROPERTY OF STATUAL PROPERTY OF STA

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on elite (12-pitch) typewriter.) Form Approved OMB No 2000-0404. Expires 7-31-86 1. Generator's US EPA ID No. 2. Page _ Information in the shaded areas UNIFORM HAZARDOUS MODO008189060 Dogument No. 0 is required by State law **WASTE MANIFEST** curi Manifest Document Number 3. Generator's Name and Mailing Address MCDOWNELL DOUGLAS CORPORATION - ST. LOUIS 12 14 18 P.O. BOX 516, ST. LOUIS, MISSOURI B. State Generator's 10 - other. 4. Generator's Phone (31) _32-3319 O. MO. Transporters ID . Dis 1.032 5. Transporter 1 Company Name 6. US EPA ID Number: K, Y, D, O, 8, 8 3 LWD, INC. D. Transporter's Phone 8. US EPA ID Number £ MO. Transporter's ID 7. Transporter 2 Company Name NONE G State Facility's ID 9. Designated Facility Name and Site Address 10 US EPA ID Number EYD088438917 LWD, INC. H. Facility's Pfions. P.O. BOX 327, HWY. 1523 42029 K Y D 0 8 8 8 CALVERT CITY, KENTUCKY 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 12. Containers Unit Il Weste No WASKE ORM-A. N.O.S. ORM-A NA1693 0 G E WASTE FLAMMABLE LIQUID, N.O.S. E FLAMMABLE LIQUID UN1993 1 Ó HAZARDOUS WASTE, LIQUID, N.O.S." NA9189 0, 0, 3 ORM-E d. J. ditional Descriptions for Materials Listed Above K Haridling Codes for Wastes Listed Above a Galerinated Solvent CB64 h Flammable Selvent 6863 Waster Oil 1865 (not a federally regulated 15. Special Handling Instructions and Additional Information "IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY, RETURN TO GENERATOR." 3/8/0 KY-210 12860 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Printed/Typed Name NOLIE Date 17. Transporter 1 Acknowledgement of Receipt of Materials Day Printed/Typed Name Signature 18. Transporter 2 Acknowledgement of Receipt of Materials Date Day Month Printed/Typed Name Signature 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date Signature Printed/Typed Name EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10



LWD, INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

63166

MCDONNELL DOUGLAS CORFORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, MO

DATE:

12/09/86

TERMS:

DUE NET 30

AMOUNT DUE:

ESCRIPTION

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CB63 55 GALLON DRUMS	20.000	URUMS		
CB66 HAZARDOUS WASTE	1.000	DRUMS		
MANIEESI_#_Q1QQ1_Q724			8 =	
P.D. + E62269C				
CB64 55 GALLON DRUMS	6.000	DRUMS		
CB63 55 GALLON DRUMS	35.000	DRUMS		
CB64 SURCHARGE ON CHLORINATED MAT	2,445.960	FOUNDS		
8.34 X SPEC. GRAV. 1.4=				
11.676‡/GAL. X % CL 31.74 =	*1			
3.706 X 55 GAL. DRUM X 12 DRUMS =				
2,445.76 ‡ CL				
- 9	4 000	LIGHT-		
WAIT TIME		HOURS		
TRANSPORTATION BY LWD, INC.	200.000	MILES		
			TOTAL	

IF NOT PAID WITHIN SO DAYS FROM DECEIPT, A CARRYING CHARGE OF CHE & ONE-HALF PERCENT PER MONTH WILL BE ABOED (TOTAL ANNUAL RATE, 10%).

OK ben 09. Jan 87

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT OF NATURAL RESOURCE
314-834-2436

ase print or type (Form designed for use on elite (12-pitch	ı) typewriter.)		Form Approv	ed. OMB No. 2000-040	4. Expires 7-31-86-
UNIFORM HAZARDOUS	1. Generator's US EPA ID No.	Marillest 2.	Pagein	formation in the sh	aded areas
WASTE MANIFEST	MODO081890) O U J XXXX	the second second	required by State I	aw.
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HCDONNELL DOUGLAS CORPOR			1112+1		1 17 13
P.O. BOX 516, ST. LOUIS,			State Generator's I	a ollier	
4. Generator's Phone (314) 232-3319)				
5. Transporter 1 Company Name	6. US EPA ID Number	9	Mile Providence	D MINOR	
LWD, INC.	K, Y, D, O, 8, 8	3, 4, 3, 8, 3, 1, 7	Transporter's Plan	(SIP)	07-02112
7. Transporter 2 Company Name	8. US EPA ID Number		MO. Transporter's		2.30
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9. Designated Facility Name and Site Address	10. US EPA ID Number	er)	Sinfa Facility 10		
LWD, INC.			KYDOSI	438817	
P.O. BOX 327, HWY. 1523	•	M	Facility's Phone		
CALVERT CITY KENTUCKY	42029 KIYIDI 01818	3 4 3 3 8 4 7	(502)	395-8313	
11. US DOT Description (Including Proper Shipping Nam		12. Containers	13.	14.	
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FLAMMABLE LIQUID UN19		920	PM 086	6/ P	103
C.				MO	
WASTE CORROSIVE LIQUID,	N O.S.		L	(3)	1019
	N1760	0 0 1	PM 004	33 P	
d.	11700		111001	MO	47
u.		h d.a.	1		Y 5 10 5 3
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	O DESIGNATED TSD FACIL	ITY, RETURN TO	GENERATO	K.	
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GENERATOR FINAL COPY — PART 2

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM

INSTRUCTIONS FOR THE COMPLETION OF THIS FORM ARE ON A SEPARATE S. IEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS. MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program

P.O. Eox 176 Jefferson City, Missouri 65102 314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
*-800-424-9300
DEPT. OF NATURAL RESOURCE:
314-634-2436

	se print or type (Form designed for use on elite (12-pitch, typewriter.)				
A	UNIFORM HAZARDOUS 1. Generator's U.	S EPA ID No.	Manifest 2. Pr	age Infor	mation in the shaded areas
Ŧ	WASTE MANIFEST M, O, D, O	0 0 8 1 8 9 6 3 0	7 2 4	if is red	quired by State law.
	3. Generator's Name and Mailing Address			Resour Manifest Doc	tunent Number
	MCDONNELL DOUGLAS CORPORATION - S	T. LOUIS	100		
				1110101	11 10 17 12 14
	P.O. BOX 516, ST. LOUIS, MISSOURI	, 53100	8.3	lute Generator's IO -	other
	4. Generator's Phone (314) 232-3319				
	5. Transporter 1 Company Name	6. US EPA ID Number	C.V	Transporter's ID	W-1082
	LWD, INC.	[K, Y, D, O, 8, 8, 4, 3		recognitions Phone	(302) 395-8313
	7. Transporter 2 Company Name	8. US EPA ID Number	The same of the sa	D Transporter's ID	
	·	8. US EFA ID NUILIDA			2 14
	NONE			rensporter's Phone	
	Designated Facility Name and Site Address	10. US EPA ID Number	G. S	tate Positiv's ID	
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	CALVERT CITY, KENTUCKY 42029				
	11. US DOT Description (Including Proper Shipping Name, Hazard Class, an	na ID Number)	12. Containers	13. Total	Unit J. Waste No.
				Quantity	Wt/Vol.
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LWD, INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

63166

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, MO DATE:

12/19/86

TERMS:

DUE NET 30

AMOUNT DUE:



DESCRIPTION

QUANTITY TYPE

RATE

AMOUNT

300.960 POUNDS 35.000 DRUMS

200.000 MILES

18.000 DRUMS

TOTAL

03 Jan 81

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 15%).

NSTRUCTIONS FOR THE COMPLETION OF THIS FORM ARE ON A BEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT OF NATURAL RESOURCE:
314-634-2436

ase print or type (Form designed ruse on elite (12-pi			Form Approved. OMB No	o. 2000-0404. Expires 7-31-86
UNIFORM HAZARDOUS	1. Generator's US EPA ID No.	Manifest 2 Document No.		in the shaded areas
WASTE MANIFEST	M,O,D,O,O,0,8,1,8	19,6,3,0,0,7,3,4	of is required	
3. Generator's Name and Mailing Address		A	uri Manifes Doc	THE RESERVE OF THE PERSON NAMED IN
MCDONTILL DOUGLAS CORPO			0,1,0,0,1	0, 7, 3, 4
P.O. BOY 516, ST. LOUIS			State Genera ID other	
4. Generator's Phone (314) 252-3710				
5. Transporter 1 Company Name	€/US EPA ID		MO. Transportera ID H 1	The second secon
LWD, ING.	K Y ID IO 8 US PAID		Transporter Phone (50	2) 5-8313
7. Transporter 2 Company Name	8. US EPA ID		MG. Transporter's 10	V. V. Marie
IONE	10 110 570 17	100	Transporter's Phone L State Facility's ID	
Designated Facility Name and Site Address LWD, INC.	10. US EPA ID	Number		
P.O. BOX 327, HWY. 1523	22		EXDOSE43831.7 Facility's Phone	
CALVERT GITY, KENTUCKY		8 8 4 3 8 8 1 7		
11. US DOT Description (Including Proper Shipping N		12. Containers	13. 14	the second secon
	ane, Frazard Class, and 10 Numbery	12. Oomanion	Total Un	it T Waste No.
8.	· · · · · · · · · · · · · · · · · · ·		Quantity Wt/\	MC.
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ORM-A NA1693		9-1-6	DM 15155	P
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FLAMMABLE LIQUID UNI		KM 0-4-0	DM 1.5/1.55	P FOOS
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d.				0
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Flammeble Solvent CB63		Management of the Control of the Con	TO 6 T 0 7	
C.				
de transfer de la company				11111
15. Special Handling Instructions and Additional Info				
"IF UNABLE TO DELIVER	TO DESIGNATED TSD FA	CILITY, RETURN TO	GENERATOR."	
KY-213	TOTAL WT. OF	MATERIAL = 32	450 TF	
16. GENERATOR'S CERTIFICATION: I hereby declare				issified, packed, marked, and
labeled, and are in all respects in proper condition	for transport by highway according to app	olicable international and national go	vernment regulations and applica	able state regulations.
Unless I am a small quantity generator who, has bee have a program in place to reduce the volume and t	n exempted by statute or regulation from the oxicity of waste generated to the degree ()	e duty to nake a waste minimization c ve determined to be economically pra	ertification under Section 3002(b acticable and I have selected the n) of RCRA, I also certify that rethodof treatment, storage
or disposal currently available to me which minimi	zes the present and future threat to it is	Meautraporthe emirophem. Mc	CONDL DOUGLA	5 GRP
Brinted/Typed Name	Signat	ure of of	4. 7 . 1.1. 1.1. 1.1. 1.1. 1.1. 1.1. 1.1. 1	Month Day Yea
KICHARD JONE	5 4	celland for	h	121281
17. Transporter 1 Acknowledgement of Receipt of Ma		1		Date
Printed/Typed Name	Signa	In Carlo		Month Day Year
WAYNE CALAS	10	Take To access	D. J.	11-11/11/12
18. Transporter 2 Acknowledgement of Receipt of Ma		/ /		Date
Printed/Typed Name	Signat	ure		Month Day Year
				عالتاجات
19. Discrepancy Indication Space				
20. Facility Owner or Operator: Certification of receip	t of hazardous materials covered by this m	anifest except as noted in Item 19		
			The second of the second	Date
Printed/Typed Name	Signat	ture		Month Day Year
Ames II. SHelion in	. 17.	un Ol Vist	1 Ark Matri	cha la las
A Form 8700-22 (Rev. 4-85) MDNR-HWG 10	- 1+./		100	



LWD, INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

63166

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 F. O. BOX 516 ST. LOUIS, MO

DATE:

1/19/87

TERMS:

DUE NET 30

AMOUNT DUE:

DESCRIPTION

QUANTITY TYPE

31.000 DRUMS

12.000 DRUMS

RATE

LUDOMA

MANIEESI # 01248 0181

P.D. - E62269C

55 GALLON DRUMS CB63

55 GALLON DRUMS CB64

8.34 X SPEC. GRAV. 1.194 =

9.958#/GAL. X % CL. 46.8 = 4.660#/GAL X 55 GAL IRUM X

X 12 DRUMS = 3,075.6# CL

SURCHARGE ON CHLORINATED MAT. 3,075,600 POUNDS CB64

55 GALLON DRUMS CB65

MANIEESI = 01001 0755

TRANSPORTATION BY LWD, INC.

55 GALLON DRUMS

35.000 DRUMS

2.000 DRUMS

200.000 MILES

TOTAL

OK ben 04 feb 8?

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT FER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%)-

NSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A 3EPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCES
314-634-2436

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Generator's Name and Mailing Address		7 7 7 7		souri Manifest Docu	-	
MCDONNELL DOUGLAS CORPORATION -			0	1,2,4,1	8	1,8,1
P.O. BOX 516, ST. LOUIS, MISSOUR	RI 63166		-	e Generator's ID -	-	THE PROPERTY OF
Generator's Phone (314) 232-3319			2.5	的是一个		SEASON TOWNS
Transporter 1 Company Name	6. US EPA ID Number	2 0 0 1	_ C: MO	Transporter's ID	H-10	0 2
LWD, INC.	XYD0384	3881	D. Trai	nsporter's Phone	(502))8313
Transporter 2 Company Name	8. US EPA ID Number		E. MO.	Transporter's ID	Walley Control	164 100 100
NONE	The second secon	<u> </u>	F. Tran	sporter's Phone	F (5)	Ar THA CAR
Designated Facility Name and Site Address LWD . INC.	10. US EPA ID Number		G. Stat	e Facility's ID		WIND THE REAL PROPERTY OF THE PARTY OF THE P
P.O. BOX 327, HWY. 1523				YD0884388	17	
	E A D U 8 8 V	3881	7 Shake	lity's Phone		
CALVERT CITY, KENTUCKY 42029 US DOT Description (Including Proper Shipping Name, Hazard Class, a	The state of the s	12. Cont		502) 395-		AL THE
	and 10 Number)	12. Cont	ainers	Total Quantity	14. Unit Wt/Vol.	1 Waste No
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RQ WASTE GRILA, N.O.S.			2 2 DM	1052 26	1 -	Other
ORM-A FA1693 (F001, F002)		네그	S DM		P	F001
HAZADDORG GROWE TROUTE NO C			2	17-		0 4 4
HAZARDOUS WASTE, LIQUID, N.O.S.		0, 0,	2 DM	00871	P	Other N/A
UNDER HATLOT		0 0	الالاصد الد		1 5	MO.
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MISSCURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 INSTRUCT ONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS 314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE US COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCE

ease print or type (Form designed for use on elite 12-pi	tch) typewriter.)		Form	Approved OM	314-634-243 3 No. 2000-0404 Expires 7-31
UNIFORM HAZARDOUS	1. Generator's US EPA ID No.	Manifest	2. Page1		ion in the shaded areas
WASTE MANIFEST	M, O, D, O, O, O, S, I, S, 9	6, 3100 7 5 5	of	1	ed by State law
3 Generator's Name and Mailing Address			A Missouri Ma		
MCDONNELL DOUGLAS CORP	ORATION - ST. LOUIS		0 1 0		
P.O. BOX 516 ST LOUT	S. MISSOURI 63166		B State Genera		CARROLL ST.
4. Generator's Phone (314) 232-33	19		THE STATE OF	A complete property of the second	
5. Transporter 1 Company Name	6. US EPA ID Numb	per			
LUD, INC.	. פ. מ. מ. א	8,4,3,3,8,1,7	C. MO ransporter's		The second secon
7. Transporter 2 Company Name	8. US EPA ID Numb		and the second second second		2) 95-8313
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9. Designated Facility Name and Site Address	10. US EPA ID Num		F. Transporter's G State Facility	The second of the second	7 324 51 uppl
LWD, INC.					是,其"种植物"。
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CALVERT CITY, KENTUCKY	42029 KYD03	8,4,3,8,8,1,7	H Facility's Pho	元 为元 大 等一 5 %	10年 10年 10年
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16. GENERATOR'S CERTIFICATION Thereby declare the labeled, and are in all respects in proper condition for the labeled and are in all respects in proper condition for the labeled and are in all respects in proper conditions.	r transport by highway according to applicable	iccurately described above builternational or	y proper shipping	name and are cl	assified packed, marked, and
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0. Facility Owner or Operator. Certification of receipt of	hazardous materials covered by this manifest e	xcept as noted in Item 19			
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EPA Form 8 00-22 Rev. 4-85 M NR HWG 1



LWD, INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

HEDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE BEPT. 042 P. D. BOX 516 ST. LOUIS, HO

63166

2/09/87 DATE:

TERMS:

DUE NET 30

AMOUNT DUE:

DESCRIPTION

QUANTITY TYPE

RATE

AKOUNT

MANIFEST # 01001 0767

P.O. # F62269C

55 GALLON DRUMS 6893 55 GALLON DRUMS C864

8.34 % SPEC. GRAV. 1.089 =

9.082 X % CL 25.03 =

2,276 X 55 GAL DRUM X 30 DRUNS = 3,755.4#/CL

CB64 SURCHARGE ON CHLORINATED MAT 3.755.400 POUNDS

CG95 NON-HAZARDOUS WASTE

TRANSPORTATION BY LUD, INC.

35.000 DRUMS

30,000 DRUHS

15,000 DRUMS

200,000 HILES

TOTAL.

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).

GENERATOR FINAL COPY — PART 2

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TSDF.

MISSOURI DEPARTMENT OF NATURAL RESOURCES
Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

HAZARDOUS WASTE MANIFEST

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

EPA Form 8700-22 (Rev. 4-85) MDNR-HWG 10

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM THEC
1-800-424-9300
DEPT OF NATURAL RESOURCES
314-634-2436

Ple	ase print or type (Form designed for use on efite (12-pitch) typewriter.)			Fo	orm Approved O	MB No 3	2000-0404. Expires 7-31-86
A	UNIFORM HAZARDOUS 1. Generator's US EPA ID No	o. M	anifest	2. Page			the shaded areas
Ī	WASTE MANIFEST MODOCO	3 1 3 9 6 3p Degil	iment No. 7	of	7		State law.
	Generator's Name and Mailing Address			A. Missouri	Manifest Docur		
	MCDONNELL DOUGLAS CORPORATION - ST. LOT			all the beautiful to the		Manager 2	Company of the second
	P.O. BOX 516, ST. LOUIS, MISSOURI 6316	66			enerator's ID - o		0 7 56 7
	4. Generator's Phone (314) 232-3319		- 1	170		\$5.434B	
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-	0.00	D 0 8 8 4 3 8	8 1 7	C. MO. Tra	nsporter's ID		
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	16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment	at are fully and accurately deser	ibad abas a b				
H	labeled, and are in all respects in proper condition for transport by nighway according	to applicable international an	d national go	vernment re	quiations and ap	plicable	state regulations
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1	Printed/Typed Name	Signature //	11/	1 1 1	1 1 1		Date Month Day Year
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LWD, INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

63166

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, HO

DATE:

2/26/87

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DESCRIPTION

	QUANTITY	TYPE
MANIFEST # 01248 0188		
P. O. # F62269C		
C863 55 GALLON DRUMS	14.000	DRUMS
C864 55 GALLON DRUHS	20.000	ORUMS
CG99 HAZARDOUS WASTE	4.000	DRUHS
MaillEST ₹ 01001 0784		
CBSS S5 GALLON DRUAS	21.000	DRUHS
CB64 55 GALLON DRUHS	21.000	DRUMS
8.34 X SPEC. GRAV. 1.111 =		
9.266#/GAL X % CL 21.4 =		
4.983≱/ GAL. X 55 OAL DRUH		
A NURUMS = A-FOCTOSE CL CBSA SURCHARGE ON CHLORINATED HAT	4,907,925	
CB34'S SURCHARGE ON CHLORINATED HAT	4,793.660	POUNDS
TRANSPORTATION BY LWD, INC.	200.000	HILES
		•

TOTAL

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 13%).

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INSTRUCTI NS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P. O. Box 176 Jefferson City, Missouri 65102 314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
PT. OF NATURAL RESOUR
314-634-2436

UNIFORM HAZARDOUS	11 0	the state of the s		TOTAL APPROVED.	MB No.	2000-0404. Expires 7-3
WASTE MANIFEST	1. Generator's US EPA ID No.	Manifest Document No.	2. Pag	e Inform	nation i	n the shaded areas
3 Generator's Name and Mai ing Address	1 0 D 0 0 0 3 1 3 9	0 0 0 0 1 8				y State law
MCDONNELL DOUGLAS CORPO	DATION OF TOUTS		A. Miss	souri Manifest Docu	ment N	umber
P.O. BOX 516, ST. LOUIS	MICROHDI COLCC		0,	1,2,4,	8	0, 1, 8,
Generator's Phone (314) 232-3319	, HISSORY 03100		B. Stat	e Generator's ID -	other	· 1000年1月1日
Transporter 1 Company Name	6 110 504 10 11		理論	Public States		
LWD, INC.	6. US EPA ID Num		C. MO.	Transporter's D	H-10	82
Transporter 2 Company Name	8. US EPA ID Num	8 4 3 8 8 1			(502) 395-8313
NONE	1		-	Transporter's ID	一种点	A SAN MARKET
Designated Facility Name and Site Address	10. US EPA ID Nur			sporter's Phone	50	SHEET THEN
LWD, ING.		ilber	5% 1850	e Facilitý s ID	200	ENTERNA STEEL
P.O. BOX 327, HIGHWAY 15	523	KYD0884388 H. Facility's Phone			17	Tolling Telephone
CALVERT CITY, KENTUCKY	42029 KYDO8	8/4 3 3 8 1 3	100	BOY BAY		PARTY VILLE
. US DOT Description (Including Proper Shipping Name	e, Hazard Class, and ID Number)	12. Contain		502) 395-		计""。"是"是特
		iz. Contain	1815	13 Tota	Unit	t. Waste No
				Quantity	Wt/Vol.	distributed to the same
RQ WASTE FLANMABLE LIQUI	ID, N.O.S.	Į.				MO
FLAMMABLE LIQUID UN19	993 (F005, F003, I	0001) 01.4	Ьм	16132	P	Other
	-			MINIS	-	D001
PO MASTE OWN-A, N.O.S.					L	MO. /1 1
ORM-A TA1693 (F001	, F002)	03.4	D 21	105/12	B	Other 001
				111/2/1/03		MO
						Other
						MO
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Ado tional Descriptions for Materials Listed Above				1-7-1-4		Other
Control of the Contro			K Handl	ing Codes for Waste	s Listed	Above
Flammable Solvent CB63	RQ = ·100 1bs.	祖外的一个大声的。	T16.	16 71017	100	
Chlorinated Solvent CB64	, $CR98 = R0 = 100.1b$	8.	811	18 300	ACC CONTRACTOR OF THE PARTY OF	
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MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102

EMERGENCY RESPONSE US COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT OF NATURAL RESOURCES 314-634-2436

Bartetee

HAZARDOUS WASTE MANIFEST

					7141L 140.	2000-0404 Expires 7-31-86
UNIFORM HAZARDOUS WASTE MANIFEST 1. Generator'S US ÉPA ID No. M O D O O O 8	1 2 0 6 3 Doc	Manifest cument No.) ₁ 7 ₁ 8 ₁ 4	2. Page of _	-		n the shaded areas
3 Generator's Name and Mailing Address	of 1 is required by State law. 'A:Missouri Manifest Document Number					
MCDONNELL DOUGLAS CORPORATION - ST. LOUI	IS ·			Lioioi	1	0 7 8 4
P.O. BOX 516, ST. LOUIS, MISSOURI 63160	B. State Generator's ID - other					
4. Generator's Phone (314) 232–3319			23%	是其中共		图 1000000000000000000000000000000000000
	ID Number		C MO.	Transporter's ID	H-10	82
LWD, INC.	D Transporter's Pfione (502) 395 ,313					
	ID Number		E MO	Transporter's ID	Csy	
NONE				porter's Phone	E 7	自然指述的
1	A ID Number		G State	Facility's ID		
LWD, INC. P.O. BOX 327, HIGHWAY 1523			28 3	KYD0884	3881	7
CALVERT CITY, KENTUCKY 42029 KYD	088438	8 1 7	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN	ty's Phone	05	21-2
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	10-0101-11-0	12. Contain		13.	14	The state of the s
				Total Quantity	Unit Wt/Vo	I. Waste No
a.				Guantity	***************************************	MO
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FLANMABLE LIQUID UN1993 (F005, F0	03, D001)	021	DM	9.19.8	P	D
b.						МО
RO WASTE BIRS-A, H.O.S.		1001	1	0:00		Oth r
0 M-4 MA1693 (F001, F002)		0,21	ŊМ	19,1,9,6	P	0 25
C.						MO
						Other
d.					-	MO
이번의 나이얼만난 요한 말했습니다. 그 모모 그리고						
						Other
Additional Descriptions for Materials Listed Above	SWEET STATE	4.0×1969	K. Handi	ling Codes for Was	tes Listed	d Abo
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* Chlorinated Solvent C364, CG98 RQ = 10	0 bs.	L. L.	表面	The state of the s	1 2	Part Land
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15. Special Handling Instructions and Additional Information						
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ку-217						
16 GENERATOR S CERTIFICATION Thereby declare that the contents of this consignment ar	e ful y and accurate y des	cirched above t	V Droppe		are class	fled paliked, marked, and
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LWD, INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

DATE:

3/11/37

TERMS:

DUE NET 30

AMOUNT DUE:

MCDONHELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, HO

63156

DESCRIPTION

QUANTITY TYPE

... 42.000 DRUHS

RATE

THUOHA

MANIFEST # 01001 0799 P.O. # F62267C

CRAS - 55 GALLON DRUBS

MANIFEST # 01248 0191

0863 55 GALLON DRUMS

55 GALLON DRUMS

8.34 X SPEC. GRAV. 1.205 =

10.049#/GAL, X % CL 15.22 = 4.529*/GAL. X 55 GAL. DRUN

k 15 DRUHS = 1,261.425% CL

CBAA SURCHARGE ON CHLORIHATED NAT 1.261.425 FOUNDS 1.000 TRIPS

TRANSPORTATION BY LUD, INC.

22,000 DRUHS

15,000 DRUHS

TOTAL

ber 87 26 mar

IF NOT PAID WITHIN 39 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET.

MISSOURI DEPARTMENT OF NATURAL RESOURCES
Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102

314-751-3241

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT OF NATURAL RESOURC
314-634-2438

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS. HAZARDOUS WASTE MANIFEST Please print or type (Form designed for use on elite (12-pitch) typewriter.)

	HAZARDOUS	1. Generator's US EPA ID N	Do	Manifest cument No.	2. Page			the shaded areas
3. Generator's Name a	MANIFEST	S 0 0 0 0 G 0 M	1 18 9 6 3 0	0,7,9,9	of	is requ	ired by S	State law.
11					A. Misso ri Ma	The State of the S	Transmitted in the last of the	ber
	L DOUGLAS CORPOR				0 1	9	1	7, 9, 9
P.O. BOX	516, ST. LOUIS,	, MISSOURI 631	.66		B State Gener	ator's ID	ther	建造是一种
4. Generator's Phone (314 232-3319						#0.54E	P. Ashre
5. Transporter 1 Comp	any Name	6. US	EPA ID Number		C. MO Transp	orter's ID	H-1	82 5 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
LUD, THE		W Y	1 D O 8 8 4 3 8	3, 8, 1, 7	D. Transporter	s Phone	(502	1 395 8313
7. Transporter 2 Comp	any Name		EPA ID Number		E. MO Transp		115,294	\$35 SEC. 18 10 SEC. 19
NONE		1 1			F. Transporter's		TOUR SE	3/1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Name and Site Address	10. US	EPA ID Number		G. State Facilit		2 194	ATTORNEY ATTORNS
LWD, INC					S. N. S. 1255	008 4	17	
	327, HIGHWAY 15				H. Facility's Ph		1.5	
CALVERT	CITY, KENTUCKY	42029 KY	D, O, S, S, 4, 3, 5	1 3 1 7				A THE REPORT OF THE PARTY OF
11. US DOT Description	n (Including Proper Shipping Nam	ne, Hazard Class, and ID Numb	per)	12. Containe		02) 39	14	
The Control of the Control				100 100		Total	Unit	J Waste No.
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I Additional Description								
Additional Description	ons for Materials Listed Ab ve			100000	K. Handling Co.	des for Waste	s Listed A	bove
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	structions and Additional Informa-					. = -		TO STATE OF STREET
	LE TO DELIVER TO	DESIGNATED TS	D FACILITY, RI	ELURN T	O_GENER	ATOR."		
KY-219								
16. GENERATOR'S CER	RTIFICATION: I hereby declare tha	t the contents of this consignme	nt are fully and accurately deep	aribaal ahaya h				
laboled, and are in a	ii reapects iii proper condition for	transport by nighway accordin	g to applicable international a	and national go	vernment requir	ations and ac	plicable s	ate regulations
Uniess I am a small o	uantity generator who has been ex ace to reduce the volume and toxic	remoted by statute or regulation	from the duty to make a waste	minimization.				
or disposal currently	available to me which minimizes	the present and future threat to	human health and the enviro	nment.	acticable and in	ave selected:	i he m eth o	of treatment, storage
Printed/Typed Name		产生产生发生工作	Signature		CLE. E	145	N	lonth Day Year
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17 Transporter 1 Ackno	wledgement of Receipt of Materia	als was a series and a series are a series and a series and a series and a series and a series a		0	1			Date
Printed/Typed Name			Signature	11			N	lonth Day Year
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18 Transporter 2 Ackno	wledgement of Receipt of Materia	ils	- LAMES	100		a supplier	4	23/067
Printed/Typed Name		Latitude Daniel Barri	Signature	/	The Real Property of the Party		A/	Date onth Day Yer
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19. Discrepancy Indicati	ion Space		- Maria - Mari					
The second of the second							Ü.	
A PER C								
20 Facility Owner or Op	perator. Certification of receipt of I	hazardous materials covered by	this manifest except as noted	d in Item 19.	4 9 3	7		
				- 17	1		Г	Date
Printed/Typed Name			Signature /	11/ n	- A	1	. / M	R, also certify that I do for the ment, storage Jonih Day Year Date Date Date Date Date Date
Amos H.	Shelton Jr.		Porto Ola	11. 1	$A_{i,j}(t)$	1/50	61	12 144 127
Form 8700-22 (Rev. 4-85			7.479.1537.773.7	, 51 / /	calle blue	9-4-0/21		O TT O

GENERATOR FINAL COPY — PART 2

COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FRO

NSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A BEPARATE SHEET

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT OF NATURAL RESOURCE
314-634-2436

ease print or type Form designed : : use on elite (12-pito				OMB No 2000-0404 Expires 7-31-86
UNIFORM HAZARDOUS	1. Generator's US EPA ID No.	Document No		nation in the shaded areas
WASTE MANIFEST	M G D 0 10 10 3 1 8 19 10 6	0,0,1,91	of is req	uired by State law.
3. Generator's Name and Mailing Address MCDONNELL DOUGLAS CORPOR P.O. BOX 516, ST. LOUIS, 4. Generator's Phone (314) 232-3319		• 0	Aissouri Manifest Doc	8 70 1, 9, 1
5. Transporter 1 Company Name	6. US EPA ID Number	Cit	O Transporter's ID	#±1082
L_LWD. INC.	KIVIDI0:318:41			(502) 395-8313
7. Transporter 2 Company Name	8. US EPA ID Number		O: Transporter's ID.	1344 F
NONE		- C. (Max.)	ransporter's Phone	A SECURITY OF THE PROPERTY OF
9. Designated Facility Name and Site Address LWD, INC.	10. US EPA ID Number		tate Facility's ID KYD08843	
P.O. BOX 327, HIGHWAY 15 CALVERT CITY, KENTUCKY			acility's Phone	9-8313
11. US DOT Description (Including Proper Shipping Nati		12. Containers	13.	14.
a.			Total Quantity	Unit I. Waste No. Wt/Vol.
RQ WASTE FLAMMABLE LIQUI	D, N.O.S.			.0, 4 , 3
FLAMMABLE LIQUID UN19	93 (F005, F003, D001)	21212 D	1 0,9,82,3	P DOO1
				0,4,1
RQ WASTE ORM-A, N.O.S.	E002)	1015	10669	Other
ORM-A NA1693 (F001	. FUU2)	[24.1 12] Li	1 0 6 6 1	/ P F001
		BARCH		- 1 - 1
		12ctee	1 1 1 1 1	Other
d.		100 A		MO.
				Other
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J-Additional Descriptions for Materials Listed Above		A COLOR OF THE REAL PROPERTY.	andling Codes for Was	- No. 6-1
Tlammable Liquid CB63 R	Q = 100 lbs.	DESCRIPTION AND PROPERTY OF THE PROPERTY OF TH	06 I ← TO7	TARREST AND DESCRIPTION OF THE PARTY OF THE
Chlorinated Solvent CB64	RQ = 1 1b.	= T	16 107	
d			A STATE OF THE PARTY OF	
15 Special Handling Instructions and Additional Informa "IF UHABLE TO DELIVER TO KY-220			GENERATOR.'	
16 GENERATOR'S CERTIFICATION I hereby declare the	t the contents of this consignment are fully and accurate	e y described above by pro	per shipping name and	are classified, packed, marked, and
labeled and are in all respects in proper cond tion for Unless I am a small quantity generator who has been entered a program in place to reduce the volume and toxic or disposal currently available to me which minimizes.	transport by highway according to applicable internatemented by statute or regulation from the duty to make titly of waste generated to the degree I have determined	t onal and national goverr a waste minimization certi to be economically practic	iment regulations and a	applicable state regulations
Printed/Typed Name	Signature		A PARTY OF THE PARTY	. Month Day Year
ODELL MECOLLO	UEH Glell	m & Collon	igh	10311087
17. Transporter 1 Acknowledgement of Receipt of Materi	als	強しいる	0	Date 4.4
Printed/Typed Name	Signature	11	1	Month Day Year
ISRUCE LANDER.	771	un /m	6	03/408/2
18. Transporter 2 Acknowledgement of Receipt of Materi		15 A 15 15	Professional Profe	Date
Printed/Typed Name	Signature		Auto Sept Cal	Month - Day Year
	The second	Start ETT	* SOL 45 -15	
19. Discrepancy Indication Space				
20. Facility Owner or Operator. Certification of receipt of	hazardous materials covered by this manifest except a	as noted in Item 19.	>	Pete
Printed/Typed Name	Signature	11/11		Date Month Day Year
Armos H. Shelton Jr.	Mac S/	V. E. M. Ex	24 V V = 5	AZ L 03 11 37
Corm 9700 00 Den 1 00 1 00 10 00 10				



HCDONHELL DOUGLAS CORPORATION

ACCOUNTS PAYABLE DEPT. 042

P. O. BOX 516

ST. LOUIS, HO

LWD, INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029
Please Remit To:

LWD, Inc. P. O. Box 1440

Paducah, KY 42002-1400 = 3/24/87

DATE:

DUE NET 30

TERMS:

AMOUNT DUE:

63165

DESCRIPTION				
	YTITHAUD	TYPE	RATE	THUOHA
MANIFEST # 01001 0806				
P.O. # F62269C				
CB63 55 GALLON DRUMS	32.000	DRUMS		
C864 55 GALLON DRUHS	24,000	DRUMS		
MANIFEST \$ 01248 0193				
CB33 55 GALLON DRUNS	10.000	ORUHS		
CB64 55 GALLON DRUMS	7.000	อลบหร		
CB65 - 55 GALLON DRUMS	1.000	ยยมหร		
8.34 X SPEC. GRAV. 1.158 =	•			
9.658*/GAL. X % CL 13.57 =	•			
7.311#/GAL. X 55 GAL. DRUM				
X 31 DRUHS = 2,235.255# CL				
C864 SURCHARGE ON CHLORINATED HAT	2,235,255	POUNDS		
TRANSPORTATION BY LWD, INC.		TRIPS		
			TOTAL	
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IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF OHE & ONE-HALF PERCENT PER MONTH WILL BE ABBED (TOTAL ANNUAL RATE, 18%).

GENFRATOR FINAL CODY __ DADT 9

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

EMERGENCY RESPONSE
U.S. CJAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURC
314-634-2436

McKee

HAZARDOUS WASTE MANIFEST

WASTE MANIFEST 1. Generator's US EPA ID No. M_10_1D_10_10_10_18_11_8_9_6	
	Manifest 2 Page Information in the shaded areas
	13 0 0 8 0 0 of is required by State law.
3. Generator's Name and Mailing Address	A. Missouri Manifest Document Number
MCDONNELL DOUGLAS CORPORATION - ST. LOUIS	0 1 0 0 1 0 8 0
P.O. BOX 516, ST. LOUIS, MISSOURI 63166	B. State Generator's ID - other
4. Generator's Phone (314) 232-3319	b. State Generator 5 ID - other
714 232-3319	
5. Transporter 1 Company Name 6. US EPA ID Number	C. MO Transporter's ID H-1082
IMD THE KIND OF SESTE	4 3 8 8 1 7 D. Transporter's Phone (502) 395-8313
7. Transporter 2 Company Name 8. US EPA ID Number	E. MO. Transporter's ID
MONE	F. Transporter's Phone
9 Designated Facility Name and Site Address 10. US EPA ID Number	and the second s
LWD, INC.	G. State Facility's ID
	KYD0 8438817
P.O. BOX 327, HIGHWAY 1523	H Facility's Phone
CALVERT CITY, KENTUCKY 42029 K, Y, D, O, 8, 8	4 3 8 1 1 (502) 395-8313
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Containers 13. 14
	Total Unit 1 Waste No
A	Quantity Wt/Vol.
DOWNER TEACHER THE ADOLANT IN THATITED AND A ME	MO. "
RQ=100 WASTE FLAMMABLE LIQUID, N.O.S.	Other Other
FLANDIABLE LIQUID UHI 993 (DOOL, TOOS, FOOS)	13 . 3 . 2 1 1 M 1 / 9 / 9 (X) P 1 2 (X) 2 (X) 2 (X)
b.	MO. 1001
RO=1 WASTE ORM-4 N.O.S.	024
ORM-A NA1693 (F001, F902)	024 01213 DM/0641 P 2001
c. (FUUL, FUUL)	
	MO
	Other
d.	MO SE AGE
	Other
1. Additional Descriptions for Malarials Listed Above	K. Handling Codes for Wastes Listed Above
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	CONTRACTOR OF THE PROPERTY OF
	T06 1T07 1 1 1 1 1 1
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Chlorinated Solvent CB64 041	TO6 TO7 1 1 1 1 1 1 1 1 1
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c. Chlorinated Solvent CR64 041 d. Special Handling Instructions and Additional Information	T06 T07 1 1 1 1 1 1 1 1 1
Chlorinated Solvent CB64 041 d. To Special Handling Instructions and Additional Information 11 IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY	T06 T07 1 1 1 1 1 1 1 1 1
Chlorinated Solvent CR64 041 d. To Special Handling Instructions and Additional Information "IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY KY-221	TO6 TO7 1 1 1 1 1 1 1 1 1
Chlorinated Solvent CR64 041 15 Special Handling Instructions and Additional Information 17 IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY KY-221 16 GENERATOR'S CERTIFICATION (hereby declare that the contents of this consument are fully and accurately and accurately accurately and accurately accurately and accurately accurately and accurately ac	ITY, RETURN TO GENERATOR."
Chlorinated Solvent CR64 041 15. Special Handling Instructions and Additional Information 17 IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY 16. GENERATOR'S CERTIFICATION. I hereby declare that the contents of this consignment are fully and accurately labeled, and are in all respects in proper condition for transport by highway according to applicable interpretation. Unless I am a small quantity generator who has been exampled by statute or condition for many according to applicable interpretation.	ITY, RETURN TO GENERATOR." urrately described above by proper shipping name and are classified, packed, marked, are emational and national government regulations and applicable state regulations.
to. Chlorinated Solvent CR64 041 15. Special Handling Instructions and Additional Information 17 IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY 18. GENERATOR'S CERTIFICATION (hereby declare that the contents of this consignment are fully and accurate labeled and are in all respects in proper condition for transport by highway according to applicable inte Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to man have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined.	ITY, RETURN TO GENERATOR." Jurately described above by proper shipping name and are classified, packed, marked, are renational and national government regulations and applicable state regulations. Lake a waste minimization certification under Section 3002(b) of RCRA, I also certify that ined to be economically practicable and I have selected the method of treatment storage.
to the content of this consignment are fully and accurately a small quantity generator who has been exempted by statute or regulation from the duty to ma have a program in place to reduce the volume and toxicity of waste generated to the degree I have determine or disposal currently available to me which minimizes the present and future threat to human health and	urately described above by proper shipping name and are classified, packed, marked, are renational and national government regulations and applicable state regulations. alke a waste minimization certification under Section 3002(b) of RCRA, I also certify that
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15 Special Handling Instructions and Additional Information 17 IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY 18 GENERATOR'S CERTIFICATION. Thereby declare that the contents of this consignment are fully and acculabeled, and are in all respects in proper condition for transport by highway according to applicable inte. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to ma have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined or disposal currently available to me which minimizes the present and future threat to human health and Printed/Typed Name: Signature	urately described above by proper shipping name and are classified, packed, marked, are rnational and national government regulations and applicable state regulations. alke a waste minimization certification under Section 3002(b) of RCRA, I also certify that nied to be economically practicable and I have selected the method of treatment, storage the environment.
15 Special Handling Instructions and Additional Information 17 IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY EVALUATED TSD FACILITY EV	urately described above by proper shipping name and are classified, packed, marked, are rnational and national government regulations and applicable state regulations. alke a waste minimization certification under Section 3002(b) of RCRA, I also certify that indeed to be economically practicable and I have selected the method of treatment, storage the environment. Month Day Yes
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15. Special Handling Instructions and Additional Information 17 IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY—221 16. GENERATOR'S CERTIFICATION hereby declare that the contents of this consignment are fully and acculabeled and are in all respects in proper condition for transport by highway according to applicable inte Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to ma have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined or disposal currently available to me which minimizes the present and future threat to human health and Printed/Typed Name Signature 17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Signature	urately described above by proper shipping name and are classified, packed, marked, are rnational and national government regulations and applicable state regulations. alke a waste minimization certification under Section 3002(b) of RCRA, I also certify that indeed to be economically practicable and I have selected the method of treatment, storage the environment. Month Day Yes
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GENERATOR FINAL COPY — PART 2

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM THE TODE

NSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

B McKee

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8502
CHEM TREC*
1-800-424-9300
DEPT OF NATURAL RESOURCES
314-634-2436

HAZARDOUS WASTE MANIFEST

rease print or type (Form designed or use on elite (12-pitch) typewriter.)	1 10 00 10 11			OMB No. 2000-0404. Expires 7-31-86
A ON THE PROPERTY OF THE PROPE	or's US EPA ID No.	Document No.	age 1 inform	nation in the shaded areas
WASTE MANIFEST 10D	0003189050	0 1 9 3	ofis requ	uired by State law.
3. Generator's Name and Mailing Address		API	discouri Manifest Doci	ment Number
MCDONNELL DOUGLAS CORPORATION	- CT TOTTS	F	1 125 45	8 0 3
			State Generators ID -	
P.O. BOX 516, ST. LOUIS, MISSO	OURI 63166	20	Maio Generators 10 -	Other
4. Generator's Phone (314) 232-3319		Sac.	40000000000000000000000000000000000000	一种工作。
5. Transporter 1 Company Name	6. US EPA ID Number	Cul	MO. Transporters ID	H-1082
TED INC	KINIUI81814131			
7. Transporter 2 Company Name	8 US EPA ID Number		AO Transporter's ID	(302)333-0313
NONE	a do E A ID Nombol			
			ransporter's Phone,	在一种工作。
Designated Facility Name and Site Address	10. US EPA ID Number	G.	State Facility's ID.	
LWD, ING.			EV0088438	017
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CALVERT CITY, KENTUCKY 42029	And the second s			Totalian a select from the select field
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16. GENERATOR'S CERTIFICATION: I hereby declare that the contents				
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20. Facility Owner or Operator: Certification of receipt of hazardous m	aterials covered by this manifest except as r	noted in Item 19.		
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Printed/Typed Name	Signature	11 1	/	Month Day Year
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Anos H. Shelton Jr. PA Form 8700-22 (Rev. 4-85) MDNR-HWG 10		Mr. V. A.	111 6	- Halter 1987
PA FORM 0700-22 (Rev. 4-85) MUNK-HWG 10				



63166

P.O. BOX 327 - CALVERT CITY, KENTUCKY 4202256 Remit To:

LWD Inc. P. O. Box 1440 Paducall, KY 42002-1400

DATE:

4/03/87 -

TERMS:

DUE NET 30

AMOUNT DUE:

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE BEPT. 042 P. O. BOX 516 ST. LOUIS, NO

ESCRIPTION

QUANTITY TYPE RATE

THUOHA

MANIFEST # 01248 0196 P.D. # F62269C 55 GALLON DRUMS CB63 MANIFEST # 01001 0814 P 0: # FA29696 CB63 55 GALLON DRUMS

14,000 DRUHS

66.000 DRUMS

TOTAL

PLEASE SEND A COPY OF INVOICE(S) WITH PATHENT ****************

> IF NOT PAID WITHIN 30 DAYS FROM RECEIPT. A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).



P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

Please Remit To: LWD, inc. P. O. Box 1440 Paducah, KY 42002-1400

HCDONNELL DOUGLAS CURPORATION ACCOUNTS PAYABLE DEPT. 042 P. 0. BOX 516 ST. LOUIS, HO

63166

4/03/87 DATE:

DUE HET 30 TERMS:

AMOUNT DUE:

DESCRIPTION

QUANTITY TYPE

RATE

THUOHA

THO INC. MANIFEST # 01248 0196 P. D. # F62259C CB43 55 GALLON DRUHS HANIFEST t 01001 0814 P.O. # E52267C. CB63 55 GALLON DRUMS

L U D TRUCKING, INC. TRANSPORTATION BY LUD, INC. 14,000 DRUHS

64.000 DRUHS TOTAL FOR L U D, INC.

1.000 TRIPS JOTAL FOR L U O TRUCKING, INC BRAND TOTAL

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THIS IS A CONSOLIDATED STATEMENT OF ALL L U D SUBSIDIARIES

PLEASE SEND A COPY OF INVOICE(S) WITH PATHENT.

ben 01 Jul 8

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & GNE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 13%).

NSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program

P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE
U.S. COAST GUARD
1-806-424-8602
CHEM TREC
1-800-422-43300
DEPT OF NATURAL RESOURC
314-634-2436

HAZARDOUS WASTE MANIFEST

UNIFORM HAZARDOUS 1. Generator's U	JS EPA ID No.	Manifest	Form 2. Page			2000-0404. Expires 7-31- the shaded areas
WASTE MANIFEST M, O, D, O	00318906	Ocument No.	of _ 7			State law.
. Generator a Name and Mailing Address		01 -1	'A. Missouri M		_	
MCDONNELL DOUGLAS CORPORATION - 1	ST. LOUIS					0,1,9,6
P.O. BOX 516, ST. LOUIS, MISSOUR	I 63156					1017121
Generator's Phone (314) 232-3319			B State Gene	Number of the Control	PERSONAL PROPERTY.	
Transporter 1 Company Name			200	0199	5	
1 1 19 2 11	6. US EPA ID Number	0 0 1	C. MO. Trans	porter's ID	TI_10	199
LMD, INC.	KYD03843	8 4 4	D. Transporte	r's Phone		2) 395-8313
. Transporter 2 Company Name	8. US EPA ID Number		E. MO. Transi	orter's ID		What had been been been the
NOVE	1		F. Transporter			
. Designated Facility Name and Site Address	10. US EPA ID Number					
	10. CG E. A ID Number		G State Facil			
LWD, INC.				0088438	3317	
P.O. BOX 327, HWY. 1523			H. Facility's P	hone		
CALVERT CITY, KENTUCKY 42029	X 1 7 D 1 0 1 8 1 8 1 4 1 3 1	8, 8, 7, 7	(50	02) 395	-831	
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**TF UNABLE TO DELIVER TO DESIGNATE KY-224 GENERATOR'S CERTIFICATION. I hereby declare that the contents of this labeled, and are in all respects in proper condition for transport by highwa Unless I am a small quantity generator who has been exempted by statute or have a program in place to reduce the volume and toxicity of waste generate or disposal currently available to me which minimizes the present and future Printed/Typed Name	consignment are fully and accurately de ay according to applicable international or regulation from the duty to make a wast ed to the degree I have determined to be ure threat to human health and the egvir	scribed above b and national g	oy proper shippir overnment regu	og name and a	re class fi eplicable 002(b) of I the meth	state regulations. RCRA, I also certify that od of treatment, storage Month Day Year
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INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET THIS DOCUMENT MUST BE USED

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8302
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURC
314-634-2436

Se print or type (Form designed for use on elite (12-pit UNIFORM HAZARDOUS	ch) typewriter.) 1. Generator's US EPA ID No.	14-76-0		MB No. 2000-G404. Expires 7-31-
	11 0 12 12 10 10 13 11 18 19	Manifest Document No.		nation in the snaded areas
WASTE MANIFEST 3. Generator's Name and Mailing Address	4 9 7 C C C C C C C	12 12 13 10 18 24	of is requ	uired by State law.
· ·			A. Missoun Manifest Docu	ment Number
MCDONNELL DOUGLAS CORPO			0,1,0,0,	1 0, 8, 1,
P.O. BOX 516, ST. LOUIS	, MISSOURI 63166		B. State Generator's ID -	other
4. Generator's Phone (314) 232-3319		•	01001	
5. Transporter 1 Company Name	. 6. US EPA ID Num	ber	C. MO. Transporter's ID	T . 1000
TUD. TNC.	= W.D.O.O	18 4 3 3 S S I		
7. Transporter 2 Company Name	8. US EPA ID Num			(502) 395-8313
	1		E. MO. Transporter's ID	
Designated Facility Name and Site Address		the second secon	F. Transporter's Phone	
LND, INC.	10. US EPA ID Nun	nber	G. State Facility's ID	
•			KYD088433	217
P.O. BOX 327, IDVI. 1523			H. Facility's Phone	
CALVERT CLIY, KENTUCKY	-42029 K, Y, D, 0, 8	, 3, 4, 3, 8, 8, 1, 1	(502) 395	0010
 US DOT Description (Including Proper Shipping Na 	me, Hazard Class, and ID Number)	12. Contain		-6.51.5 14.
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Additional Descriptions for Materials Listed Above.			K. Handling Codes for Waste	es Listed Above
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			100 100	
5. Special Handling Instructions and Additional Inform				
	ation			
"IF UNABLE TO DELIVER TO	DESTGNATED TSD FACTI	name and a	n demarator u	
KY-223				
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GENERATOR'S CERTIFICATION: I hereby declare the labeled, and are in all respects in proper condition for	r transport by highway according to applicable	e international and national of	by proper shipping name and a lovernment regulations and ar	re classified, packed, marked, and
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	- Santara			Month Day Year
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. I admity Owner or Operator: Certification of receipt of	nazardous materials covered by this manifest	andapt as notes in item 15.		
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Printed/Typed Name	Signature	/	*	Date Month Day Year
**	Signature	1 1 10	11 1	Date Month Day Year
	Signature	1	11 1	



P.O. BOX 327 - CALVERT CITY, KENTUCKY 42029 LW S Lot.

Please Remit To: P. C. Eco. 1. 43 Paducah, KY 42002-1100

HODONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, NO 63166

DATE:

4/27/87

TERMS:

DUE HET 30

AMOUNT DUE:

DESCRIPTION

QUANTITY TYPE

RATE

THUOHA

MANIFEST # 01001 0828

P.O. # F62269C

55 GALLON DRUMS 0863 55 GALLON DRUHS CB54 0.01 X CPEC, CRAV. 1.109-

9,249#/6AL. X % CL 45.7% =

4.226#/GAL X 55 GAL. DRUH X

X 25 DRUMS = 5,810.75# CL

SURCHARGE ON CHLORINATED HAT. TRANSPORTATION BY LUD, INC.

55.000 DRUHS

25,000 DRUHS

5,810.750 POUNDS 1.000 TRIPS

TOTAL

************************ PLEASE SEND A COPY OF INVOICE(S) WITH PAYHENT 我表示我是我我我的我们的我们的我们的的,我们们的我们的我们的我们的的,我们的我们的我们的我们的,我们们的我们的我们的,我们们的我们的我们的,我们们的我们的我们的

> OK ber 87

> > IF NOT PAID WITHIN 30 DAYS FROM FILLEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).

- DART 2 GENERATOR FINAL CODY

THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS DEPUM FROM

MISSOURI DEPARTMENT OF NATURAL RESOURCES
Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

INSTRUCTIONS FOR THE COMPLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-421-9300
DEPT. OF NATURAL RESOURC:
314-634-2436

Please print or type (Form designed for use on elite (*2-p	toh) typewritar.)		Fori	m Approved. C	OMB No. 2000-0404 Expires 7-3
UNIFORM HAZARDOUS	Generator's US EPA ID No.	Manifest	2 Page -		nation in the shaded areas
WASTE MANIFEST	100000000000	Document No.	of	- 1	uired by State law.
3. Generator's Name and Mailing Address		215 1219 13131			iment Number
MCDONNELL DOUGLAS CORI	PORATION - ST. LOUIS		ALPERT SALEDINGS		
P.O. 30X 516, ST. LOUI	IS MISSOURT 63166			0101	
4. Generator's Phone (314) 232-331	in amboonit oping		B. State Gen	erator's ID -	other
	Ly	•			
5. Transporter 1 Company Name	6. US EPA ID Numbe	er	C MO Trans	sporter's ID	
LWD, INC.	IK 7 D O 8	8 4 3 3 8 1	7	sporter 3 ID	H-1082
7. Transporter 2 Company Name				er's Phone	(502) 395-8313
101E	8. US EPA ID Numbe	er	E. MO. Trans	porter's ID	Marketta American programs
		F 1 E F 1 1	F. Transporte	r's Phone	
Designated Facility Name and Site Address	10. US EPA ID Numb		G. State Faci	lity's ID	The first territory and the second
LWD, INC.			Charles and Control of	TD0384	20017
P.O. BOX 327, HWY. 152	3			Selection of the select	30017
CATHERE CITY INTERIORS	/ / / / / / / / / / / / / / / / / / / /		H. Facility's F		AND AND THE SECOND
- CHAVEL GLII, KIMILULET	42029 K ₁ Y ₁ D ₁ O ₁ S ₁ S	8,4,3,8,8,1	7 包括电影	(502) 3	95-8313
11. US DOT Description (Including Proper Shipping N	lame, Hazard Class, and ID Number)	12. Conta	iners	13.	14.
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a.			-	Quantity	Wt/Vol.
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J. Additional Descriptions for Materials Listed Above		NAME OF THE PARTY	14 11 41 6	F 1 1	
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15. Special Handling Instructions and Additional Inform					
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KY-225					
16 GENERATOR'S CERTIFICATION. Thereby declare to	hat the contents of this consignment are fully and a	ccurately described above	e by proper shipp	ng name and a	ire classified, packed, marked, ar
in the second se	or transport by ingitively according to applicable	memational and national	government rea	ulations and at	policable state regulations
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or disposal currently available to me which minimiz	es the present and future threat to human health:	mined to be economically and the environment	practicable and	have selected	the method of treatment, storag
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	y v	The c	34AUL	~	10,414,918
17. Transporter 1 Acknowledgement of Receipt of Mate	erials /)				Date
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18. Transporter 2 Acknowledgement of Receipt of Mate	erials	/		J.	Date
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Printed/Typed Name		xcept as noted in Item 19.			Date
Printed/Typed Name	of hazardous materials covered by this manifest e	xcept as noted in Item 19.	F-7.		Date Month Day Yea
		xcept as noted in Item 19.	Francisco de la companya della companya della companya de la companya de la companya della compa		



63166

Please Remit To:

P.O. BOX 327 - CALVERT CITY, KENTUCKY 42029- W D , Inc. P. O. Box 1440

Paducah, KY 42002-1400

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, NO

DATE:

5/18/37

TERMS:

DUE HET 30

AMOUNT DUE:

DESCRIPTION QUANTITY TYPE AHOUNT RATE MANIFEST # 01001 0844 P.O. * F74985C 10.000 DRUNS CB64 55 GALLOH DRUMS 23.000 BRUHS CB43 55 GALLON DRUHS MANIFEST # 01248 0199 19,000 DRUMS 55 GALLON DRUHS 55 GALLON DRUMS 18.000 08003 0833 55 GALLON DRUHS 1.000 BRUHS 0865 8.34 X SPEC. GRAV. 1.091 = 9.099#/GAL. X % CL 28.7% = 2,511 X 55 GAL, DRUM X 27 DRUHS □ 4,164.545# CL SURCHARGE ON CHLORINATED HAT 4,164,545 POUMDS TRANSPORTATION BY LUO, INC. 1,000 TRIPS TOTAL

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IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF CNE & GNE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 13%).

NSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

HAZARDOUS WASTE MANIFEST

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U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURC
3:4-634-2436

UNIFORM HAZARDOUS	1. Generator's US EPA ID No.	Manifest 2. Page Inform	ation in the shaded areas
WASTE MANIFEST	1. Generator's US EPA ID No.	Document No.	
	11 10 10 10 10 10 10 10 10 10 10 10 10 1		ired by State law.
3. Generator's Name and Mailing Address		A. Missouri Manifest Docum	ment Number
MCDOWNELL DOUGLAS CORPO	RATION - STI LOUIS	0 1 1 0 1 0 1 3	0,8,4,4
		B State Generator's ID - o	
P.O. BOX 516, ST. LOUIS	" WITPROBURT DOTOR	GENERAL STATE OF STAT	iner
Generator's Phone (314) 232-3319	5 - 144	01001	
. Transporter 1 Company Name	6. US EPA ID Number	C. MO. Transporter's ID	_1082
7770 7780	Transport		
TIND TMC. Transporter 2 Company Name.	- 8. US EPA ID Number	14 3 3 3 1 7 D. Transporter's Phone	(502) 395-8313
Transporter 2 Company Name .	- 8.03 EPA ID Number	E. MO. Transporter's ID	
TITIT	<u> </u>	F. Transporter's Phone	
. Designated Facility Name and Site Address	10. US EPA ID Number		Market on her and her a
LED, INC.			
P.O. BOX 327, HWY. 1523		KYD08843	88 17
		H. Facility's Phone	
CALVERT CLTY, KENTUCKY	42029 K,Y,D,0,8,8	[4,3,5,8,1,7] (502) 3	- 0212
1. US DOT Description (Including Proper Shipping N	lame, Hazard Class, and ID Number)	12. Containers 13.	14.
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	1, F002)	5 (0) 3 2 0 0 ()	p Other
orela weress (500	de g di V din j		F001
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FLANSIABLE LIQUID UNL		1 1 1	Otner
THE EMPTH HEUSTE ONT	JJJ (EUUJ, EUUJ, DUU		- TOOS
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Additional Descriptions for Materials Lister Above		K Handling Codes for West	a Listed Absorb
		K. Handling Godes for Waste	es Listed Above
Additional Descriptions for Materials Listed Above Chlorinated Solvent CB		K Handling Codes for Waste	es Listed Above
Chlorinated Solvent CB	K4	T06 T07	es Listed Above
	K4	T06 ₁ T07 T06 ₁ T07	es Listed Above
Chlorinated Solvent CB	K4	T06 T07 T06 T07	es Listed Above
Chlorinated Solvent CB Flarmable Solvent CB63	B 1	T06 ₁ T07 T06 ₁ T07	es Listed Above
Calor nated solvent CB Flammable Solvent C363 5. Special Handling Instructions and Additional Inform	R1	T06 T07 T06 T07 T06 T07	es Listed Above
Calor nated solvent CB Flammable Solvent C363 5. Special Handling Instructions and Additional Inform	R1	T06 T07 T06 T07	es Listed Above
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EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCE 314-634-2950

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES
Division of Environmental Quality
Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

HAZARDOUS WASTE MANIFEST

	nt or type (Form designed for use on elite (12-pitch					Form Approved O	MB No. :	2000-0404. Expires 7-31-86
A	UNIFORM HAZARDOUS	1. Generator's US E		Manifest Document No.	2. Page	1 Inform	ation ir	the shaded areas
-	WASTE MANIFEST	00001	00118996	0,0,1,9,9	of .	is requ	ired by	State law.
	nerator's Name and Mailing Address MCDONNELL DOUGLAS CORPOR	TP _ MOTTA	TOTTS		3654000	ouri Manifest Docu	RESOUR	THE RESERVE THE PROPERTY OF THE PARTY OF THE
	P.O. BOX 516, ST. LOUIS,					1 2 4	new line	0,1,9,9
	nerator's Phone (314) 232-3319				B. State	Generator's ID - c	ther	A PARAMETER
	Insporter 1 Company Name		0.110.501.10.11		5.65			Policy Control
	LVD, ING.	*	6. US EPA ID Number	38817		Transporter's ID		
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	ICNE		1			Transporter's ID	和作品	
1	signated Facility Name and Site Address		10. US EPA ID Number			sporter's Phone		And Alberta
	WD, INC.		10. 00 EFA ID NUMBER			Facility's ID		
	2.0. BOX 327, MVY. 1523					KYDOSSA388 ity's Phone	317	
	LALVERT CITY, KENTUCKY	42029	IK.Y.D.O.S.S.4	38817	0343			
	S DOT Description (Including Proper Shipping Nam			12. Contain	_	(502) 395.	821	3
1 2 5					-	Total	Unit	I. Waste No.
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J. Add	ditional Descriptions for Materials Listed Above				K. Hand	ling Codes for Waste	s Listed	Above
a.	Migrisstad Solvent CB6	4 Participant		2 Files AFG	T06	1 107		
b . 7	Planable Solvent CB63			经营业企业	T06	T07		
	laste 011 CE65 (not a	federally	remulated wast	e) .	T06	ITO7		
u.					1	i Price		1 1 1
	ecial Handling Instructions and Additional Informat							
,	'IF UNABLE TO DELIVER TO	DESIGNATE	D TSD FACILITY	, RETURN T	O GE	NERATOR."		
1	Andreas State of the State of t	Und 11 14-14-14-14-16	0.02					
16. GE	NERATOR'S CERTIFICATION: theraby declare that	t the contents of this co	insignment are fully and accura	te y described above b	WELCONO!	chinaina anna anna	re classif	ied, packed, marked, and
lab		transport by highway	according to applicable interes				nlicable	state reculations
Un	eled, and are in all respects in proper condition for i	ampled by statute or re	according to applicable interni	ational and national g	overnme	nt regulations and ac	phicable	
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P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

Please Remit To: LWD, Inc. P. O. Box 1440 Paducah, KY 42002-140

HCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. D. BOX 516 ST. LOUIS, HO

63166

DATE:

5/11/87

TERMS: DUE HET 30

AMOUNT DUE:

DESCRIPTION

QUANTITY TYPE

30,000 BRUMS

13,000 DRUNG

2.000 DRUHS

35,000 DRUHS

RATE

AHOUNT

L U D. INC.

HANIFEST # 01248 0205

P.O. # F74985C

CB33 55 GALLON DRUMS

HANIFEST # 01001 0865

0864 55 GALLON DRUMS

55 GALLON DRUMS CG99

55 GALLOH DRUMS

CB33

8:34 X SPEC. GRAV. 0.987 = 8.232*/GAL. X % CL 13.53 = 1.114 X 55 GAL, DRUM X 15 DRUMS = _

·919.05# CL

CBS4 SURCHARGE ON CHEORINATED HAT 919.050 FOUNDS

L U O TRUCKING, INC. TRANSPORTATION BY LUD, INC.

TOTAL FOR L U U, INC.

1.000 TRIPS

TOTAL FOR L U D TRUCKING, INC

GRAND TOTAL

OK ben 02 Jul

THIS IS A CONSOLIDATED STATEMENT OF ALL L W O SUBSIDIARIES

PLEASE SEND A COPY OF INVOICE(S) WITH PAYHENT.

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ABDED (TOTAL ANNUAL RATE,

CENEDATOR FINIAL CODY

MISSOURI DEPARTMENT OF NATURAL RESOURCES

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT OF NATURAL RESOURC
314-634-936

NSTRUCTIONS FOR THE COM-	Division of Environmental Quality	=5	150 12 15
PLETION OF THIS FORM ARE ON A SEPARATE SHEET.	Waste Management Program Box 176 Jefferson City, Missouri 65102		EMERGENCY RESPON
THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED	314-751-3241		1-800-424-8802 CHEM TREC
SHIPMENTS . HAZA	RDOUS WASTE MANIFES	ST	1-800-424-9300 DEPT OF NATURAL RESC
lease print or type (Form designed for use on elite (12-pitch) typewriter.			314-634-2436
	tor's US EPA ID No. Manifest	2. Page Information in	000-0404 Expires 7-31-66 the shaded areas
WASTE MANIFEST	ρρρβ 1 3 9 0 5 D Ocument No.	- 10 may	E2 1961
3. Generator's Name and Mailing Address	F 6 F F 6 F 6 F 6 F 6 F 6 F 6 F 6 F 6 F	A Missouri Manifest Document Nu	
MCDONNELL DOUGLAS CORPORATION	- ST TOUTS	THE REPORT OF THE PERSON OF TH	The second second second
P.O. BOX 516, ST. LOUIS, MISSO	TDT' 62166	0 1 2 4 8	0 2 0 5
4. Generator's Phone (314) 232–3319	OKT 02760	B. State Generators ID - other	10 TO 31 Section 1
5. Transporter 1 Company Name	-6:-US EPA ID Number	01248	11-1030
LWD, INC.		C. MO. Transporter's ID XXXX	an inches and a supplied that
7. Transporter 2 Company Name	[C1Y1D101818141318181117		395-8313
	8. US EPA ID Number	E. MO. Transporter's ID	
NONE 9. Designated Facility Name and Site Address		F. Transporter's Phone	基础实验 证据
LWD, INC.	10. US EPA ID Number	G. State Facility's ID	
P.O. BOX 327, HIGHWAY 1523		KYD088438817	
CALVERT CLTY, KENTUCKY 42029	1	H. Facility's Phone	
	KYD088438817	(502) 395-831	3
11. US DOT Description (Including Proper Shipping Name, Hazard Cl	ass, and ID Number) 12. Contain	141	
		Total Unit Quantity Wt/Vol.	I. Waste No.
BO III CONT TO VIOLENTE TOURS OF CO			MO.
RO WASTE FLAMMABLE LIQUID, N.O			.0 4 3
	(F005, F003, D001) 0 3 0	D 11 1236 0 P	DO01
b			MO
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c.	1 1		MO.
(4)	9		Other
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			Other
J Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed	Above
a Flammable Liquid CB63 RO = 1	00 1bs.	T06 T07	1.5
D. C. C. C. Contract of			
c'entre			
d g	LEADING THE REMARKS TO SERVICE STATES	PERSONAL PROPERTY OF THE PERSON NAMED IN COLUMN TWO IN COL	
15. Special Handling Instructions and Additional Information	A *-		
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"IF UNABLE TOODELIVER TO DESIG	MATER ISB FACILITY, KETUKN T	TO GENERATOR.	
		<u> </u>	
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents labeled, and are in all respects in proper condition for transport by	of this consignment are fully and accurately described above highway according to applicable international and national	by proper snipping name and are classifi	ed, packed, marked, and
Unless I am a small quantity generator who has been exempted by st	atute or regulation from the duty to make a waste minimization		
have a program in place to reduce the volume and toxicity of wasteg or disposal currently available to me which minimizes the present a	enerated to the degree I have determined to be economically:	practicable and I have selected the method	od of treatment, storage.
Printed/Typed Name	✓ Signature	- Maria Consultant	Month Day Year
AINFTE C. SCHUET	S C	feling.	0608127
17. Transporter 1 Acknowledgement of Receipt of Materials	The state of the s	7)	
Printed/Typed Name	Signature		Date Month Day Year
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18. Transporter 2 Acknowledgement of Receipt of Materials	- I sally I loss	- per	I Chalais
Printed/Typed Name	Signature		Date Month Day Year
			month Day rear
19. Discrepancy Indication Space	Parallel Committee Committ		
10. State partey indication Space			
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20. Facility Owner or Operator: Certification of receipt of hazardous ma	aterials covered by this manifest except as noted in Item 19.		
			Date
Printed/Typed Name	Signature	2 A 1 7	Month ,Day Year
Arma 4. Shelton JR.		6.01 / 1500 B I	69 64 21
Form 8700-22 (Rev. 4-85), MDMR-HMG 10		The state of the s	

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3241

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT, OF NATURAL RESOURCE 314-634-2436

がたれせど

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed : g use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2000-0404, Expires 7-31-88 1. Generator's US EPA ID No. UNIFORM HAZARDOUS Manifest Information in the shaded areas Document No. 11000000318963 **WASTE MANIFEST** 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number MCDONNELL DOUGLAS CORPORATION - ST. LOUIS 0,1,0,0 P.O. BOX 516, ST. LOUIS, MISSOURI 53166 B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 01001 5. Transporter 1 Company Name 6. US EPA ID Number C. MO. Transporter's ID H-1082 IND, INC. [Y D O 18 2 4 3 8 8 8 D. Transporter's Phone (502) 395-8313 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID HOUE F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID LWD, ING. ンロしい KYD088438817 P.O. BOX 327, HIGHWAY 1523 H. Facility's Phone K, Y, D, O, S, 3, 4, 3, 8, 8, 1 CALVERT CITY, KENTUCKY 42029 (502) 395-8313 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 12. Containers EINI A I 13. Total I Waste No. Quantity MO 3 01 CHEDATOD RO WASTE BOM-A. N.O.S. n ORM-A NA1693 (F001, F002) MI P G F001 Elb RO WASTE FLAMMABLE LIQUID. N.O.S. (F002, D002) O Och Other FLANMABLE LIQUID UN1993 KYMBYKKEBYKKERY 2000 DH A T רחחד MO Ó RO WASTE FLAMMABLE LIQUID, N.O.S. THI1993 (F005. F003. D001) 3 3 DM 14385 Other J Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM Chlorinated Solvent CB64 RO=1 1b. T06 T07 Chlorinated/Flammable Solvent CG99 RO=1: 1b. T06 TO7 Flammable Liquid CB63 30 = 1002/bs **TO6** T07 d. 15. Special Handling Instructions and Additional information "IF UNABLE TO DELIVER TO DESIGNATED TSD FACILITY, RETURN TO GENERATOR." XY-223 Lab Sample No.: 4995 Chlorine % by Wt.: Specific Gravity: 16. GENERATOR'S CERTIFICATION. I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper concition for transport by highway according to applicable international and national government regulations and applicable state regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Printed/Typed Name Signature Day .0 SCHUE G Я 17. Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day Den 0818 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Month Day 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Signature Month Day lmos H. Shelton Jr.

C



P.O. BOX 327 - CALVERT CITY, KENTUCKY 42029; Remit To:

LWD Inc. P. O. Box 1440 Paducah, KY 42002-1400 Paducah, KY

DATE:

6/20/87

TERMS:

DUE HET 30

AMOUNT DUE:

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, HO

63166

DESCRIPTION

QUANTITY TYPE

RATE

AMOUNT

L W D TRUCKING, INC. TRANSPORTATION BY LWD, INC. 20,000 DRUMS

61,000 DRUHS

TOTAL FOR L W D, INC.

TOTAL FOR L U O TRUCKING. INC

OK ben 15 Jul

THIS IS A CONSOLIDATED STATEMENT OF ALL L U D SUBSIDIAPIL'S

PLEASE SEND A COPY OF INVOICE(S) WITH PAYMENT.

IS NOT PAID WITHIN 30 DAYS FROM DESCRIPT, A CARRYLIG CHARGE OF ONE & CHE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 19%).

NSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOUR! DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT OF NATURAL RESOURC

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed : r use on elite (12-pitch) typewriter.) Form Approved OMB No 2000-0404 Expires 7-31-86 1. Generator's US EPA ID No UNIFORM HAZARDOUS Information in the shaded areas M, O, D, O, O, O, 8, 1, 8, 9, 0, **WASTE MANIFEST** is required by State law 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number MCDONNELL DOUGLAS CORPORATION - ST. LOUIS 11,2,4 8 PO BOX 516, ST. LOUIS, MISSOURI 63166 B. State Generator's ID 4. Generator's Phone (314) 232-3319 5 Transporter 1 Company Name 6. US EPA ID Number C. MO. Transporter's ID H-1082 6.0 d Y, J LWD, IHC. S 8 TOVO D. Transporter's Phone (502) 7 Transporter 2 Company Name E. MO. Transporter s 1D NONE F. Transporter's Phone 9 Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID LWD, INC. KYD088438817 ンロしつ PO Dox 327, HWY. 1523 H. Facility's Phone 4,3,8,8,1 (502) 395-8313 CALVERT, CITY, KENTUCKY 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) CINIAL 12. Containers 13. Total 14. Unit I. Waste No. Quantity 0 1 CENIEDATOD RQ = X 100 WASTE FAAMMABLE LIQUID, N. O. S. Other LIOUID UN1993 (FG05, F003, D001) G D MÚ NER Other A T Ó Other MO Other J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above THIS COPY MUST BE RETAINED BY THE GENERATOR AFTER ITS RETURN FROM Flammable liquid CB63 RQ-= 108 lbs. ET 0 6 T Ô. 15. Special Handling instructions and Additional Information "IF UNABLE TO DELZVER TO DESIGNATED TSD FACILITY, RETURN TO GENERATOR." KY-231 16 GENERATOR'S CERTIFICATION. Thereby declare that the contents of this consignment are full, and accurately described above by proper shipping name and are class fied, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international government regulations and applicable state regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RCRA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. Month Day Year 0 (4)4 17. Transporter 1 Acknowledgement of Receipt of Materials Date Day AZOPORTER Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Day Month 19 Discrepancy Indication Space F AC 20 Facility Owner or Operator. Cert fication of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date Printed/Typed Name Signature Day

INSTRUCTIONS FOR THE COMPLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality

Waste Management Program

P.O. Box 176 Jefferson City, Missouri 65102

314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-900-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURC
314-634-2436

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se print or type (Form designed for use on elite (12-pitch	i) typewriter.)				MR No. 2	000-0404. Expires 7-31-
UNIFORM HAZARDOUS	1. Generator's US EPA ID No.	Manifest	2. Page	and the second second		the shaded areas
WASTE MANIFEST	110,D10,0,0,3,1,3,9	6.310.0.3.7.3		is requ		
3. Generator's Name and Mailing Address	1:1012 0 0 0 2 0 2	9 9 9 9 9 1		Manifest Docum		
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MCDONNELL DOUGLAS CORPO		18 j				0 8 7 3
PO BOX 516, St. Louis,	Missouri		B. State G	enerator's ID - c	other	
4. Generator's Phone (314) 232-3319		Teller France			n=10-12	THE PROPERTY OF
5. Transporter 1 Company Name	6 US EPA ID Numbe	er had a second	C. MO. Tra	insporter's ID	मे≥ा	082
TIM TVC.	12, 7, 7, 0, 8,	8 4 3 8 8 17	D. Transpo	rter's Phone (395-8313
7. Transporter 2 Company Name	8. US EPA ID Numbe		-	nsporter's ID	2041	<u> </u>
	- 1			rp) /44 6 https://mid.com	TALL THE	
9. Designated Facility Name and Site Address	10. US EPA ID Numb			rter's Phone		
o, benginated a somy wante and one Address	10. OS EPA ID NUMB	oer .	G. State Fa		0017	
- LWD, INC.				KYD08843	DOT1	
PO BOX 327, ENY \$253 15	523		H. Facility's	Phone		
Colorest City Vontucker	42020 7 7 7 7 6 8	8438837	(502)	395-831	3	
11. US DOT Description (Including Proper Shipping Nam	ne, Hazard Class, and ID Number)	12. Contain		13.	14.	
		1	1 :	Total	Unit Wt/Vol.	I. Waste No.
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						0 4 3
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FLANGABLE LIGHTD UNIGS	93 (F003, F005, D001)	13.164.12.	1DM 19	1421810	P	D001
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63166

Please Remit To:

P.O. BOX 327 - CALVERT CITY, KENTUCKY 42029

P. O. Box 1440

Paducah, KY 42002-1400

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, NO

DATE:

6/29/87

TERMS:

DUE HET 30

AMOUNT DUE:

DESCRIPTION

QUARTITY TYPE

20.000 BRUHS

11.000 BRUNS

32,000 DRUHS

RAIE

AHOUNT

L U D. INC.

HANIFEST + 01248 0207

P.O. € F74985C

CBS4 55 CALLON DRUHS

0865 NON-HAZARDOUS GASTE

MANIFEST # 01001 0878

CB64 55 GALLOH DRUNS

8.34 X SPEC. GRAV. 1.155 =

9.633#/GAL. X % CL 54.4 = -

5.240#/GAL. X 55 GAL. DRUH

X 52 DRUNS = 14,986,4# CL

SURCHARGE ON CHLORINATED HAT 14.988.400 POUNDS 0864

CB65 NON-HAZARDOUS WASTE

CG95 NON-HAZARDOUS WASTE

11.000 DRUHS 5.000 DRUHS

TOTAL FOR L U D, THC.

L U D TRUCKING, INC. TRANSPORTATION BY LUD, INC.

1.000 TRIPS

TOTAL FOR L M D TRUCKING, INC.

GRAND TOTAL-

OK (5) ul 8 Deen

THIS IS A CONSOLIDATED STATEMENT OF ALL I. U O SUBSIDIARIES

PLEASE SEND A COPY OF INVOICE(S) WITH PAYMENT.

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ASDED (TOTAL ANNUAL RATE, 18%).

NSTRUCTIONS FOR THE COMPLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCE 314-634-2436

e print or type Form designed : r use on elite (12-pitch) typewriter) UNIFORM HAZARDOUS 1 Generator's US EPA ID N				MB No 2000-0404 Expires 7-
WASTE BRANIEST	Man fest Document No	2. Page	_	ation in the shaded areas
3. Generator's Name and Mailing Address		of		ired by State law.
MCDONNELL DOUGLAS CORPORATION - ST. LOUIS			Manifest Docur	374 200
P.O. BOX 516, ST. LOUIS, MISSOURI 63166				3 2 0
4. Generator's Phone (314) 232–3319		A DOLLAR	enerators ID - o	ther
			01248	
· · · · · · · · · · · · · · · · · · ·	433817	C. MO. Tra	ensporter's ID	-10
	7,3,0,3,1,1			504) 19 -8313
Transporter 2 Company Name 8. US EPA ID Number NOTE			insporter's ID	ABBUT ALGERIA
		1000	rter's Phone	
		G. State Fa	acility's ID	THE PARTY OF THE PARTY OF
LWD, INC.			KYD0884	38817
P.O. BOX 327, HIGHAY 1523	/ 2 0 0 1	H Facility's	Phone .	195 10 10
CALVERT CITY, KENTUCKY 42029 K,Y,D,O,8,8		1.50%	(502)	195-8313
US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Contain	ers	13. Total	14. Unit I. Waste No.
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				100000000000000000000000000000000000000
HAZAPDOUS WASTE, LIQUID, M.O.S.			. / .	Ot er
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	Mcklo 1			Other
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ITNNETTE L. DIHUETZ - Il Ann	The second secon		3	Date
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Printed/Typed Name Loyd Benne 11- Signature	Bame	4		Month Day Y
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8. Transporter 2 Acknowledgement of Receipt of Materials	ept as noted in Item 19	4		Month Day Y

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET.

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MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-900-424-8902
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURC
314-634-2436

I I I I I I I I I I I I I I I I I I I	te (12-pitch) typewriter.)			FO	IIII Approved. O	MB No. 2	000-0404. Expires 7-31
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	LOUIS, MISSOURI 63	700		B. State Ge	nerator's ID - c	ther	
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		D 0 8 3 4	7 9 9 4 1	D. Transpor	ter's Phone	502)	395-8313
7. Transporter 2 Company Name	8. US F	EPA ID Number		E. MO. Tra	nsporter's ID	CO U	
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9. Designated Facility Name and Site Address	10. US	EPA ID Number		G. State Fa	cilify's ID		CAN BE SENTENCED OF
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	-				********	2991	7
P.O. BOX 327, HIGH				H. Facility's	Phone		
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11. US DOT Description (Including Proper Shi	ipping Name, Hazard Class, and ID Numb	er)	12. Contain	ers	(502) 3	14.	
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b.						-	MO.
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Please Remit To:

P.O. BOX 327 - CALVERT CITY, KENTUCKY 42029 D inc.

P. O. Box 1440

Paducah, KY 42002-1400

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. D. BOX 516 ST. LOUIS, MO

63166

7/20/87 DATE:

TERMS:

DUE NET 30

AMOUNT DUE:

DESCRIPTION

QUANTITY TYPE

52.000 DRUMS

28,000 DRUHS

RATE

THUOHA

L U D. INC.

MANIFEST # 01001 0894

F74985C

CB63 55 GALLON DRUMS

55 GALLON DRUMS

C864

8.34 X 1.2363 = 10.311 X % CL 37.0 =

3.815 GAL. X 55 GALLON DRUM X 28 DRUMS =

5.875.1# =

CB64

W D TRUCKING, INC. TRANSPORTATION BY LWD, INC.

SURCHARGE ON CHLORINATED HAT 5,875.100 POUNDS

TOTAL FOR L W D, INC.

200.000 MILES

TOTAL FOR L W D TRUCKING, INC

GRAND TOTAL

OK

THIS IS A CONSOLIDATED STATEMENT OF ALL L W D SUBSIDIARIES

PLEASE SEND A COPY OF INVOICE(S) WITH PAYMENT.

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).

NSTRUCTIONS FOR THE COMPLETION OF THIS FORM ARE ON A BEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCE
314-634-2436

GENERATOR FINAL COPY - PART 2

HAZARDOUS WASTE MANIFEST

UNIFORM HAZARDOUS							DIAID IAC	2000-0404	. Expires 7-31
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WASTE MANIFEST	114 C, D, O, O,	0,3,1,3,9,3	5.3 10.0	ent No.	of	is requ	uired by	State la	w
3. Generator's Name and Mailing Address					A Mineau	n-Manifest Docu			James Williams
NaDannall Davales Com		T		- 1		Frank Labour & Tolker Labour 1979	and the same of	The second second	0 0
McDonnell Douglas Corpora					OF	10,0	1	U	8,9
P.O. Box 516, St. Louis,	Missouri	63166			B. State G	enerator's ID -	other	40, 50,00	
4. Generator's Phone (314) 232-3319					Beile .	01001			
5. Transporter 1 Company Name		6 US EPA ID Number			C 440 T-	ansporter's ID	77 7	000	
7.77		_							
7 Transporter 2 Company Name		SISIOIDIVIS		3111	D. Transpo	orter's Phone	(50	2) 39	5-8313
7. Transporter 2 Company Name		8. US EPA ID Number			E. MO. Tra	ansporter's ID			
Tone	1		1 15 15 16	1	F. Transpo	rter's Phone	SEMIL	12.60	
9. Designated Facility Name and Site Address		10. US EPA ID Numbe		The second name of the second	G. State F	acility's ID		~ \$ 10 mm	Service Long to
E LND, Inc.					C-744 166		0047		
P.O. Box 327, Highway 152) 3			1		CYD08843	991/	9434	
Calvert City, Mentucky 4		7 7 7 7 7 7 7	1. 7. 3. 5		H. Facility	s Phone	WINE Z		HATA SATA
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b.						1 71	-	I DOO	1.
RQ=1 Waste ORM-A, H.O.	C C		1		u I			100000000000000000000000000000000000000	4 1 7
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Chlorinated Solvent CB64	RO = 1 1	b) 7 9 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1873	T06	т07	(A) = (E)	2 miles	and the second
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HODONNELL DOUGLAS CORPORATION

ACCOUNTS PAYABLE DEPT. 042

P. O. BOX 516

ST. LOUIS, NO

LWD, INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

63166

Please Remit To:

LWD. Inc. P. O. Box 1440

Paducah, KY 42002-1400

DATE:

7/22/87

TERMS:

DUE HET 30

AMOUNT DUE:

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CB43 55 GALLON DRUMS	29,000	DRUHS -		
C865 NON-HAZARDOUS WASTE	7,000	กลบหร-		
HCDONNELL DOUGLAS CORPORATION				
HANIFEST # 01001 0897				
CB65 HON-HAZARDOUS WASTE	2,000	DRUHS -		
CB65 NON-HAZARDOUS WASTE	•	POUHUS		
CB63 55 GALLON DRUNS	13.000	UBUH5 -		
CG95 NON-HAZARDOUS WASTE	1.000	DRUMS -		
8,34 X SPEC. GRAV. 1.123 = 9.366#/GAL				
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* PLEASE SEND A COPY OF INVOICE(S) WITH P	AYHENT.	*	-

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

Please print or type (Form designed for use on elite (12-pitch) typewriter.)

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3176

BMcKge

Form Approved, OMB No. 2050-0039, Expires 9-30-88

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCE
314-534-2436

HAZARDOUS WASTE MANIFEST

1. Generator's US EPA ID No. UNIFORM HAZARDOUS Manifest Document No. Information in the shaded areas **WASTE MANIFEST** is required by State law. 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number McDonnell Douglas Corporation - St. Louis 0,1,2,4,8 P.O. Box 516, St. Louis, Missouri B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 01248 5. Transporter 1 Company Name 6. US EPA ID Number C. MO. Transporter's ID H-1082 LWD, Inc. 3 8 8 1 D. Transporter's Phone (502) -395-8313 Ļ 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID flone F. Transporter's Phone 9. Designated Facility Name and Site Address LND . Inc . 10. US EPA ID Number G. State Facility's ID KYD088438817 YOU'S P.O. Box 327, Highway 1523 H. Facility's Phone Y D O 3 8 4 3 8 8 1 7 Calvert City, Kentucky 42029 (502) 395-8313 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 13. SERIFOATOR FIRMAI Total I. Waste No. Wt/Vol Quantity RQ = 1 Waste Corrosive Liquid, N.O.S. O 0 Other F002 Corrosive Material UN1760 E MC, 1 Waste ORM-A, M.O.S. E Other F001 NA1693 (F001, F002) A мо. О 3 RQ = 100 Waste Flammable Liquid, N.O.S. 0 Flammable Liquid UN1993 (F005, F003, D001) 0001 1 Hazardous Waste, Liquid, N.O.S. Other NA9189 ORM-E N/A J. Additional Descriptions for Materials Listed Above a Methylene Chloride/Phenol/Formic Acid AFTER ITS RETURN FROW LOY Chlorinated Solvent CB64 1106 c Flanmable Liquid CB63 TQ6 d. Waste 017 CB65 15. Special Handling Instructions and Additional Information "If unable to deliver to designated TSD facility, return to generator. Lab Sample No.: 4332 Specific Gravity: 1,122 Chlorine % by Wt.: 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. BY THE GENERATOR If I am a large quantity operator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator. I have made a good faith effort to minimize my waste generation and select the best waste management method available to me that I can afford Printed/Typed Name Signature NNETTE SICHUE 17. Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name Sįgnature Month Day Ιδ)ima 66-**COPY MUST BE RETAINED** 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Signature Month Day 19. Discrepancy Indication Space 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date Printed/Typed Name Signature Month Day THIS 11.11.11.12.7 EPA Form 8700-22 (Rev. 9-86) MDNR-HWG 10 PREVIOUS EDITIONS ARE OBSOLETE

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORMARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

EPA Form 8700-22 (Rev. 9-86) MDNR-HWG 10 PREVIOUS EDITIONS ARE OBSOLETE

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3176

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCE
314-634-236

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039, Expires 9-30-88 1. Generator's US EPA ID No. UNIFORM HAZARDOUS Information in the shaded areas MOD00081 8,9,6,31 **WASTE MANIFEST** is required by State law. 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number McDonnell Douglas Corporation - St. Louis 0 1 0 0 1 P.O. Box 516, St. Louis, Missouri B. State Generator's ID - other 4 Generator's Phone (314) 232-3319 5. Transporter 1 Company Name C. MO. Transporter's ID 11-1082 LWD, Inc. D. Transporter's Phone PART 7. Transporter 2 Company Name E. MO. Transporter's ID None F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID LWD. Inc. KYD088438817 CENFRATOR FINAL COPY P.O. Box 327, Highway 1523 H. Facility's Phone Calvert City, Kentucky 42029 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number, Total I. Waste No. MOXXXXXXXX Other ORM-E NA9,29 GINZER 3 RQ Waste Flammable Liquid, N.O.S. Other Flammable Liquid HOW 1 A OR Asbestos-Containing Material MO J. Additional Descriptions for Materials Listed Above AFTER ITS RETURN FROM a. Kecytle b. Flammabie Liquid c. Asbestos LC#8 15. Special Handling Instructions and Additional Information "If unable to deliver to designated TSD facility, return to generator. 16. GENERATOR'S CERTIFICATION. I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. GENERATOR If I am a large quantity operator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method available to me that I can afford. Printed/Typed Name Signature ANNETTE THE 17. Transporter 1 Acknowledgement of Receipt of Materials Day Printed/Typed Name COPY MUST BE RETAINED BY)immy 0.71 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name Day Month Signature 19. Discrepancy Indication Space A 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date Month Day Printed/Typed Name Signature



L W-D, INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

63166

PAGE

Please Remit To: LWD, Inc. P. O. Box 1440 Paducah, KY 42002-14(

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, MO

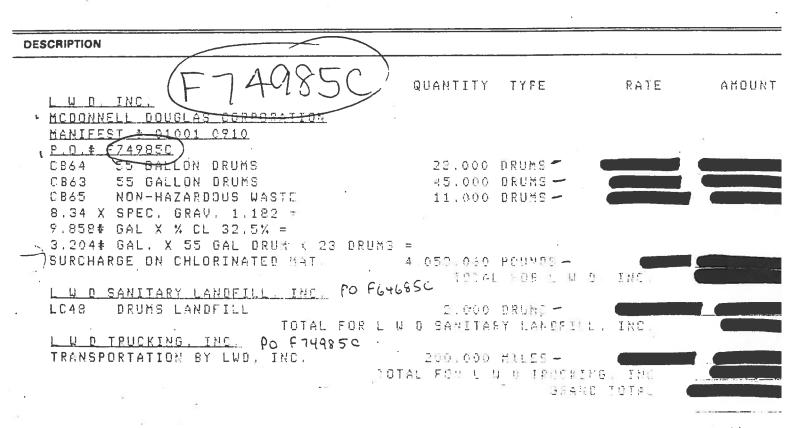
DATE:

8/10/37

TERMS:

DUE NET 30

AMOUNT DUE:



THIS IS A CONSOLIDATED STATEMENT OF ALL L.W-D-SUSSIDIARIES

PLEASE SEND A COPY OF INVOICE(S) WITH PAYHENT, Total due to CMD Grow Total due to to LWD POF 74 985C pa Flubssc =

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & CHEMALF PERSENT PER-MONTH --WILL BE ADDED (TOTAL ANNUAL RATE, 18%).

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INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3176 B Mckey

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1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCE
314-634-2436

HAZARDOUS WASTE MANIFEST

						AB No. 20	
A		US EPA ID No.		2. Page _	Informa	ation in t	he shaded areas
T	WASTE MANIFEST	0,0,0,3,1,3,2,5,3,5	17171717	of	is requi	ired by S	tate law.
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ı	P.O. Box 516, St. Louis, Missouri		-				0 19 11 10
		1 05100	7	B. State C	ienerator's ID - o	iner	
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1	LWD, Inc.	LYD08343	3, 8, 1, 7	D Transn	orter's Phone (5		
	7. Transporter 2 Company Name	8. US EPA ID Number			ansporter's ID	1127	195-8313
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	9. Designated Facility Name and Site Address	10. US EPA ID Number		G. State F	acility's ID		
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	a Chlorinated Solvent CB64			106	101		
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P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

L W D . Inc. P. O. Box 1440 Paducah, KY 42002-1400

HCOONNELL BOUGLAS CORPURATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, NO

63166

DATE:

8/14/87

TERMS:

DUE HET 30

AMOUNT DUE:

DESCRIPTION

QUANTITY TYPE

RATE

THUOHA

L W D. INC.

MANIFEST # 01248 0214

P.O.# F74985C

CBA3 55 GALLON DRUNS

MANIFEST # 01001 0725

P.O.# F74985C

CBA5 HON-HAZARDOUS WASTE

CG75 NON-HAZARDOUS WASTE

TRANSPORTATION BY LUB, INC.

13.000 DRIINS

59,000 DRUHS 9,000 DRUHS

TOTAL FOR L U D, THE.

TOTAL FOR L U O TRUCKTUO, THE ORAND TOTAL

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THIS IS A CONSOLIDATED STATEMENT OF ALL L U D SUSSIDIARIES

PLEASE SEND A COPY OF INVOICE(S) WITH PATHENT.

IF NOT PAID
RECEIPT, A CARRYNNO CHARGE OF
ONE & ONE-HALF PERCENT PER MONTH
ONE & ONE-HALF PERCENT PER MONTH
WILL BE ADDED (TOTAL ANNUAL RAYE,
18%).

OK ben

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

EPA Form 8700-22 (Rev. 9-86) MDNR-HWG 10 PREVIOUS EDITIONS ARE OBSOLETE

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3176

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8902 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCE 314-634-2436

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039, Expires 9-30-88 1. Generator's US EPA ID No. UNIFORM HAZARDOUS Information in the shaded areas H, O, D, O, O, O, S, 1, 8, 9, C ,6 13 **WASTE MANIFEST** is required by State law 3. Generator's Name and Mailing Address A. Missouri Manirest Document Number McDonnell Douglas Corporation - St. Louis 0 1 2 4 8 P.O. Box 516, St. Louis, Missouri 63166 B. State Generator's ID - other 232-3319 4. Generator's Phone (314) 01248 5. Transporter 1 Company Name ** 6. US EPA ID Number C. MO. Transporter's ID H-1082 LWD, Inc. K, Y, D, 0, 8, 3, 4, 3, 8, 8, 1, (502) 395-8313 D. Transporter's Phone PART 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID Mone F. Treasporter's Phone I 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID LWD, Inc. KYD088438817 COPY P.O. Box 327, Highway 1523 H. Facility's Phone Calvert City, Kentucky 42029 K, Y, D, O, S, S, 4, S, 8, 8, 1, 7 (502) 395-8313 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) GENERATOR FINAL 13. Heit I. Waste No. Quantity 3 0 RQ Waste Flammable Liquid, N.O.S. Other D001 UH11993 (F005, F003, D001) ON B DIM Flammable Liquid GENER MŮ. Other ATOR Other MO. J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above RETURN FROM a CB63 Flammable Liquid RQ = 100 lbs. T06 T07 15. Special Handling Instructions and Additional Information **AFTER ITS** "If unable to deliver to designated TSD facility, return to generator." 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. GENERATOR If I am a large quantity operator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method available to me that I can afford. ANUETTE THE (17. Transporter 1 Acknowledgement of Receipt of Materials TRANSPORTER Signature Day Month THIS COPY MUST BE RETAINED BY 18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Signature Month 19. Discrepancy Indication Space A 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. L Signature Day Printed/Typed Name Month Year 171105



09

11

LWD; INC.

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

63166

Please Remit To: L W D Inc. P. O. Box 1440 Paducah, KY 42002-1400

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, MO

DATE:

8/31/37

TERMS:

DUE NET 30

AMOUNT DUE:

SCRIPTION AMOUNT RATE QUANTITY TYPE L U D. INC. MANIFEST : P.O. # (F74985C 55 SALLON DRUMS - 25,000 DRUMS CB64 8.34 X SPEC. GRAV. 1.385= 11.551#/GAL. X % CL 61.0 = 7.046≢/GAL % 55 GAL. DRUH X 57 DRUMS = 22,089.21* CL SURCHARGE ON CHLORINATED HAT 22.089.210 POUNDS-55 GALLON DRUMS T ± 01248 0214 - 16.000 DRUHS 0833 ANIFEST 55 GALLON DRUMS _ 30,000 DRUMS TOTAL FOR L U D, INC. W D SANITARY LANDFILL, INC. 5.000 DRUMS DRUMS LANDFILL TOTAL FOR L W D SANITARY LANDFILL, INC. U D TRUCKING, INC. TRANSPORTATION BY LWD, INC. 200,000 HILES total due for TOTAL FOR L G. O. TRUCKING, INC eache Total 80 F74996C, THIEGOLD A CONSOLIDATED STATEMENT OF ALL L U 0 SUSSICIARIES PLEASE SEND A COPY OF INVOICE(S) WITH PAYMENT. VENDOR CLA IF NOT PAID WITHIN SO BAYS FROM DATE RECEIVE RESELPT, A CARONING CHARGE OF

GHE & CHEMPLY DIRECTLY PER MONTH

THE DE ADOLD WATER THINKS FARE,

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3176

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURC
314-634-2436

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039, Expires 9-30-88 1. Generator's US EPA ID No. UNIFORM HAZARDOUS Manifest Document No. Information in the shaded areas **WASTE MANIFEST** 1000000000 0.0.5 is required by State law. 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number 0 11 10 10 11 McDonnell Douglas Corporation - St. Louis B. State Generator's ID - other P.O. Box 516, St. Louis, Missouri 63166 4. Generator's Phone (314) 5. Transporter 1 Company Name 6. US EPA ID Number C. MO. Transporter's ID H-1082 LMD, Inc. Y1Y1D10181814131313181117 D. Transporter's Phone (502) 395-8313 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID F. Transporter's Phone None 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID LWD, Inc. KYD088438817 ンロしい P.O. Box 327, Highway 1523 H. Facility's Phone "IVIBI01318141318131117 Carvert City, Kentucky 42029 (502)11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) TIMIA! Total Unit I. Waste No. Quantity MO. COL'A CITIE Waste ORM-A, N.C.S. Other (7001. F001 NER 0 0.35 RQ = 100 lbs. Waste Flammable Liquid, M.O.S. Other 1511003 Flanmabla Liquid (F005 F003, D001 D001 A Ó B Mctar Other d. MO J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above Chlorinated Solvent CB64 TO6 1 IT07 Flammable Liquid 1707 TO6 1 15. Special Handling Instructions and Additional Information "If unable to deliver to designated TSD facility, return to generator." Lab Sample No.: 9860 Chlorine % by Wt.: 6/. [Specific Gravity: /. 3 35 16. GENERATOR'S CERTIFICATION I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. AV THE CENERATOR If I am a large quantity operator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method available to me that I can afford. Printed/Typed Name ANNETTE 0,81718 SCHUET 17. Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name Day Signature Month Year RETAINED 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name Day Signature Month 19. Discrepancy Indication Space MIICT RE AC 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date T Day Printed/Typed Name Month Signature Year EPA Form 8700-22 (Rev. 9-86) MDNR-HWG 10 PREVIOUS EDITIONS ARE OBSOLETE

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3176

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCE
314-634-2436

ase print or type (Form designed for use on elite (12-pite	ch) typewriter.)				Form Approved, OI	MB No. 2	050-0039, Expires 9-30-8
UNIFORM HAZARDOUS	1. Generator's US EF	PA ID No.	Manifest	2. Page .	Inform	ation in	the shaded areas
WASTE MANIFEST	0.0101010	0 0 0 0 0 1 0 0	Document No.	of	is requ	ired by	State law.
3. Generator's Name and Mailing Address				A. Misso	uri Manifest Docui	nent Nu	mber
McDonnell Dgoglas Corpor			-	0 1	12 14 18		0 12 11 16
P.O. Box 516, St. Louis,	Missouri (3155			Generator's ID - c	EDW. Full Sec.	
4. Generator's Phone (314) 232-3319			. 8	44	01248		
5. Transporter 1 Company Name		6. US EPA ID Number		C. MO. 1		H-10	87
IMD. The.	. 1	לוצומוסופועוץ	3,3,8,1,7		porter's Phone (
7. Transporter 2 Company Name		8. US EPA ID Number			ransporter's ID	3021	J73-0323
Tildae				F. Transt	orter's Phone		
9. Designated Facility Name and Site Address		10. US EPA ID Number		THE PARTY	Facility's ID	N-200	
IND, Inc.					KYD08843	9217	
P.O. Box 327, Highway 15	523		5	H. Facilit	v's Phone	210100	
Calvert City, Kentucky	42029	K Y D 6 3 3 4	3 8 8 1 7		(502) 39	5-83	13
11. US DOT Description (Including Proper Shipping Na		The second second second	12. Contains	ers	13.	14.	
		•			Total Quantity	Unit Wt/Vol.	I. Waste No.
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RQ = 1 lb. Waste ORM-	AMAG			, [0 4 1
0211 4 3141663 (2001	-		0.3.2	ъм	13025	· D	Other F001
b.	- 37756					1	MO.
Asbestos-Containing Mace	erial		0.0.5	DM	0, 3, 03,5	P	Other
c.					21 01 12 12	-	MO.
				l			1 1
	B Mc	Paga v	1				Other
d.							MO.
							1 1
							Other
J. Additional Descriptions for Materials Listed Above			15 h 20 cm 17 mm	K. Handl	ing Codes for Wast	es Listed	Above
a. CB64 Chlorinated Solve	AND SHADE THE			TTC	The state of the s	A STAR	97 1 1
	THE RESERVE OF THE PARTY OF THE			11.0	107		
c. LC48 Contains Asbestos	Finers					On HEED	
d.		78.00					
15. Special Handling Instructions and Additional Inform							
"If unable to deliver to	designated	TSD facility,	return to	gene	rator.Y		NY-24=
						100	
Lab Sample No.: 4 160	Chlorine % by	7 115.:(31.0	Specific G	ravit	7 1.53	5	
Lab Sample No.: 4960							
16. GENERATOR S CERTIFICATION: I hereby declare the	hat the contents of this cor	nsignment are fully and accura	tely described above b	y proper s	hipping name and a	re classif	
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INVOICE



LWD, INC.

63166

Flanse Remit To:

P.O. BOX 327 - CALVERT CITY, KENTUCKY 42029 Inc.

P. O. Box 1440 Paducah, KY 42002-1400 /

HODDNNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, NO

DATE:

9/14/87

TERMS:

DHE NET 30

AMOUNT DUE:

DESCRIPTION

QUANTITY TYPE

* 18.000 ANHHS

41.000 BEHRS

14,000 BRUHS

RATE

AHOUNT

L H D. INC.

HANTFEST # 01001 0977

P.O. * F74985C

55 GALLON DRUMS CBA4

55 GALLON DRUMS 0863

MANIFEST # 01248 0219

55 GALLON DRUMS CB63

B.34 X SPEC. GRAV. 1.006 =

8.39 X % CL 1.87 =

0,15 X 55 GAL. DRUH X

18 DRUHS = 148.50#

CO64 SURCHARGE ON CHLORINATED HAT 148,500 POUNDS

& OOO DRUHS

TOTAL FOR L U D, INC.

I U D SANITARY LANDEILL INC.

LC48 DRUMS LANDFILL

TOTAL FOR L U D SANITARY LANDEILL INC.

1. W D TRUCKING, INC.

TRANSPORTATION BY LUD, INC.

200.000 HILES

TOTAL FOR L U D TRUCKTUG, INC

GRAND IDIAL

OK ben

THIS IS A CONSOLIDATED STATEMENT OF ALL L U D SUBSIDIARIES

,我我会最后的最后的,我们的一个人,我们的一个人,我们的一个人,我们的一个人,我们的一个人,我们的一个人,我们的一个人。

PLEASE SEND A COPY OF INVOICE(S) WITH PAYHENT.

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERGENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3176

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCE
134-834-348

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039, Expires 9-30-88 1. Generator's US EPA ID No. UNIFORM HAZARDOUS Information in the shaded areas M, O, D, O, O, O, S, 1, 3, 9, 6, 3 10 **WASTE MANIFEST** is required by State law. 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number McDonnell Douglas Corporation - St. Louis 0,1,0,0,1 P.O. Box 516, St. Louis, Missouri 63166 B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 01001 5. Transporter 1 Company Name 6. US EPA ID Number C. MO. Transporter's ID H-1082 LWD, Inc. K, Y, D, O, 8, S, 4, 3, 8, 8, 1, 7 (502) 395-8313 D. Transporter's Phone DART 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID None F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number -G. State Facility's ID LMD, Inc. KYD033438817 CODY P.O. Bex 327, Highway 1523 H. Facility's Phone Calvert City, Kentucky 42029 K, Y, D, O, S, S, 4, 3, 8, 8, 1, 7 (502) 395-8313 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) 13. TENFER TOR FINA! I. Waste No. Quantity 0 RO = 1 lb.Waste ORM-A, N.O.S. Other NA1693 (F001, F002) F001 0 R0 = 100 lbs.Waste Flammable Liquid, M.O.S. Flammable Liquid UN1993 (FC05, F003, DC01) D001 MO. Other 0.06 Asbestos-containing Material Otter J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above AFTER ITS RETURN FROM a Chlorinated Solvent CB64 TO6 T07 b. Flammable Solvent CB63 T07 TQ6 Asbestos LC48 15. Special Handling Instructions and Additional Information "If unable to deliver to designated TSD facility, return to generator." Lab Sample Number: 4883 Specific Gravity: 1.006 Chlorine % by Wt.: 1.8 %, 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. BY THE GENERATOR If I am a large quantity operator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment. OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method available to me that I can afford. Printed/Typed Name Month Signature SCHUETZ 17. Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name Day Signature RETAINED 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Day 19. Discrepancy Indication Space MUST BE 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. COPY Date Printed/Typed Name Day Amos H. Shelton EPA Form 8700-22 (Rev. 9-86) MDNR-HWG 10 PREVIOUS EDITIONS ARE OBSOLETE

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3176

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCE
314-634-2436

UNIFORM HAZARDOUS WASTE MANIFEST M. D. D. O. O. J. S. D. D. D. D. D. D. D. D. D. D. D. D. D.
WASIE MANIFEST S. Generator's Name and Maling Address McDonnell Douglas Corporation - St. Louis P.O. Box 516, St. Louis, Missouri 53166 4. Generator's Phone (314) 232-3319 S. Transporter 1 Company Name Lind, Inc. T. Transporter 2 Company Name None 9. Designated Facility Name and Site Address Lind, Inc. P.O. Box 527, Highway 1523 Calvert City, Kentucky 42029 IN US EPA ID Number Lind, Inc. RQ = 100 lbs. Waste Flammable Liquid, N.O.S. Flammable Liquid UN11993 (F005, F003, D001) RQ = 100 lbs. Waste Flammable Liquid, N.O.S. Flammable Liquid UN11993 (F005, F003, D001) J. Additional Descriptions for Materials Listed Above Reflammable Solvent C863 C. MO. Transporter's ID - Other O122 O1395- B. State Generator's ID - Other O124 O124 O125 O125 O125 O125 O125 O125 O125 O125
S. Generator's Name and Mailing Address McDonnell Douglas Corporation - St. Louis P.O. Eax 516, St. Louis, Missouri 63166 4. Generator's Phone (314) 232-3319 5. Transporter Company Name Lind, Inc. K.Y.D.O.B.S.B.A.D. Number None 9. Designated Facility Name and Site Address Lind, Inc. P.O. Box 327, Highwray 1523 Calvert City, Kentucky 42029 11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number) 12. Containers 13. 14. Ousnity Phone RQ = 100 lbs. Waste Flammable Liquid, N.O.S. Flammable Liquid UN11993 (F005, F003, D001) M. M. M. Ousnity D. M. A. Missouri Manifest Document Number O1 2 8. State Generator's 10 - other O1248 C. MO. Transporter's Dine H-1002 C. MO. Transporter's Dine C. MO. Transporter's Phone C. State Facility's ID F. Transporter's Phone C. State Facility's ID F. Transporter's Phone C. State Facility's ID F. Transporter's Phone C. State Facility's ID F. Transporter's Phone C. State Facility's ID F. Transporter's Phone C. State Facility's ID F. Transporter's Phone C. State Facility's ID F. Transporter's Phone C. State Facility's ID F. Transporter's Phone C. State Facility's ID F. Transporter's Phone C. State Facility's ID F. Transporter's Phone C. State Facility's ID F. Transporter's Phone C. State Facility's ID F. Transporter's Phone C. State Facility's ID F. Transporter's Phone C. MO. Transporter's Phone C. Mo. Transporter's Phone C.
McDonnell Douglas Corporation - St. Louis P.O. Ext 516, St. Louis, Missouri 63166 4. Generator's Phone (314) 232-3319 5. Transporter 1 Company Name LWD, Inc. K, Y, D, O, 8, 3, 4, 3, 8, 1, 7 7. Transporter 2 Company Name None S. Designated Facility Name and Site Address LWD, Inc. P.O. Box 327, Highway 1523 Calvert City, Kentucky 42029 K, Y, D, O, 8, 8, 4, 3, 8, 1, 7 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) RQ = 100 lbs. Waste Flammable Liquid, N.O.S. Flammable Liquid UN1993 (F005, F003, D091) D. Additional Descriptions for Materials Listed Above Flammable Solvent CB63 C. H. Handling Codes for Wastes Listed Above Flammable Solvent CB63 C. H. Handling Codes for Wastes Listed Above Flammable Solvent CB63 C. H. Handling Codes for Wastes Listed Above Flammable Solvent CB63 C. H. Handling Codes for Wastes Listed Above Flammable Solvent CB63 C. H. Handling Codes for Wastes Listed Above Flammable Solvent CB63 C. H. Handling Codes for Wastes Listed Above Flammable Solvent CB63 C. H. Handling Codes for Wastes Listed Above Flammable Solvent CB63 C. H. Handling Codes for Wastes Listed Above Flammable Solvent CB63 C. H. Handling Codes for Wastes Listed Above Flammable Solvent CB63 C. H. Handling Codes for Wastes Listed Above Flammable Solvent CB63 C. H. Handling Codes for Wastes Listed Above
P.O. Box 516, St. Louis, Missouri 63166 B. State Generator's ID - other 01248
4. Generator's Phone (314) 232-3319 5. Transporter 1 Company Name
S. Transporter's Company Name
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LWD, Inc. K Y D 0 8 3 4 3 8 1 7 D. Transporter's Phone (502) 395- Transporter 2 Company Name R. US EPA ID Number E. MO. Transporter's ID
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15. Special Handling Instructions and Additional Information
"If unable to deliver to designated TSD facility, return to generator."
KY-246
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packe labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regu
If I am a large quantity operator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practic
have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environme
small quantity generator. I have made a good faith effort to minimize my waste generation and select the best waste management method available to me that I can afford.
Printed/Typed Name Signature 4 Month
ANNETTE C. SCHUETZ Comitte C. Schut, 1091
17. Transporter 1 Acknowledgement of Receipt of Materials
Printed/Typed Name Signature Month
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18. Transporter 2 Acknowledgement of Receipt of Materials
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LWD, INC.

Please Remit To:

Gatherin, My 4:

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029

MCDONNELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. D. BOX 516 ST, LOUIS, MO

33166

DATE:

9/18/37

TERMS: DUE HET 30

AMOUNT DUE:

DESCRIPTION

QUANTITY TYPE

19,000 DRUMS 20.000 0RHHS

35,000 DRUMS

PATE

THUONA

L U D. INC.

MANIFEST # 01248 0222

P.D. # F74985C

CB64 55 CALLON DRUMS CB63 55 GALLON DRUMS

HADIFEST # 01001 0987

55 GALLON DRUHS

8.34 X SPEC. GRAV. 1.389 = 11.58#/GAL. X % CL 65% =

7.521/ GAL. X 55 GAL. DRUH

X 19 DRUHS = 7,858

CB54 SURCHARGE ON CHLORINATED HAT 7.858.400 POUNDS

TOTAL FOR L W D, INC.

L U D TRUCKING, INC. TRANSPORTATION BY LUD, INC.

200,000 HILES TOTAL FOR L W D TRUCKING, INC

GRAND TOTAL

OK

THIS IS A CONSOLIDATED STATEMENT OF ALL L U D SUBSTULARIES

PLEASE SEND A COPY OF INVOICE(S) WITH PAYMENT.

IF NOT PAID WITHIN SO DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%),



INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES
Division of Environmental Quality
Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3176

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURCE 314-634-2436

Ple	ease print or type (Form designed for use on elite (12-pitch)	typewriter.)				Form Approved, Oil	MR No. 2	050-0039, Expires 9-30-88
T _A	UNIFORM HAZARDOUS	1. Generator's US EPA ID No.		Manifest	2 Page			the shaded areas
	WASTE MANIFEST	M, O, D, O, O, O, 3, 1	.3.9.0.6 lo	Ocument No.	o1	. 1		State law.
	3. Generator's Name and Mailing Address		3 3 3 3 3	9 2 3 2		ri Manifest Docur		
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П	P.O. Box 516, St. Louis, M	1800urt 63166	P		-		E09-01925	0 2 2 2
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	LND, Inc.		0, 8, 8, 4, 3,	8, 3, 1, 7	D. Transp	orter's Phone	(502) 395-8313
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	None		الأللا	_1_1_1	F. Transp	orter's Phone	West S	
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INSTRUCTIONS FOR THE COMPLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES
Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3176

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE U.S. COAST GUARD 1-800-424-8802 CHEM TREC 1-800-424-9300 DEPT. OF NATURAL RESOURC 314-634-2436

Ple	ase print or type (Form designed for use on elite (12-pitch)	typewriter.)		Form	Approved. OI	MB No. 2	050-0039. E	xpires 9-30-8
A	UNIFORM HAZARDOUS	1. Generator's US EPA ID No.	Manifest	2 Page			the shade	-
IT	WASTE MANIFEST	M, O, D, O, O, O, 8, 1, 8, 9,	6 3 10 Document No. 7	7 of			State law.	
П	3. Generator's Name and Mailing Address	351		A. Missouri Ma				Substantial
П	McDonnell Douglas Corporat			0,1,0				8 7
	P.O. Box 516, St. Louis, M	lissouri 63166		B. State Gener			Street Long.	
	4. Generator's Phone (314) 232-3319			A TEXADON AND THE	1001			
	5. Transporter 1 Company Name	6. US EPA ID Number	r	C. MO. Transp	STATE OF THE	H-10	182	
	LWD, Inc. K, Y, D, O, 8, 3, 4, 5, 8, 8, 1, 7						395-	_8313
-	7. Transporter 2 Company Name	8. US EPA ID Number		D. Transporter		(302	, ,,,,,	-0323
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	9. Designated Facility Name and Site Address	10. US EPA ID Numbi		F. Transporter's G. State Facilit				
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	15. Special Handling Instructions and Additional Information							
	"If unable to deliver to d	esignated TSD facility	7, return to	generato	Σ ''	35	Y-247	
	Lab Sample Humber: .	Specific Gravity:	Ghiorine	The Total				1
	16 GENERATOR'S CERTIFICATION! I berefu declaration					. 60.		£"
	 GENERATOR'S CERTIFICATION: I hereby declare that the labeled, and are in all respects in proper condition for tree. 	ransport by highway according to applicable in	nternational and national o	government regula	ations and ac	plicable	state regulat	tions.
l	If I am a large quantity operator, I certify that I have a prog have selected the practicable method of treatment, stora	ram in place to reduce the volume and toxicity	of waste generated to the de	egree I have deter	nined to be ed	conomica	ally practical	ole and that I
	small quantity generator, I have made a good faith effor	t to minimize my waste generation and select	the best waste manageme	nt method availab	le to me that	I can aff	nvironment, ord.	OH, ITTAM a
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<u> </u>	20. Facility Owner or Operator: Certification of receipt of hi	azardous materials covered by this manifest e	xcept as noted in Item 19.				,	
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Ÿ	Printed/Typed Name	Signature	23.2				Month D	ay Year
- 1	i keen no laaney		A"L				76 (1)	4. (1009)



L W.D., INC.

Please Remit To:

P.O. BOX 327 — CALVERT CITY, KENTUCKY 42029 LWD Inc.

63166

P. O. Box 1440 Paducah, KY 42002-1400

HODONHELL DOUGLAS CORPORATION ACCOUNTS PAYABLE DEPT. 042 P. O. BOX 516 ST. LOUIS, MU

DATE: 10/08/87

TERMS: DIE HET 30

AMOUNT DUE:

DESCRIPTION

QUARTITY TYPE

25,000 DRUHS

10.000 DRUHS

44.000 DRUHS

RATE

AHOUNT

L U D. INC. PICK UP DATE 10/07/87 HAHIFEST # 01001 1001 P.O. # F74985C

បីមិខ័ក 55 GALLUN DRUMS

55 GALLON DRUMS

CB65 NON-HAZARDOUS WASTE

8.34 X SPEC. GRAV. 1.099 = 9.166#/GAL. X % CL = 0.098#/GAL X 55 GAL. DRUN X 25

DRUHS = 134.75# X

UPCHARGE ON CHLORINATED MAT.

- 134.750 POUNDS

TOTAL FOR L U 8, THC:

L U D TRUCKING, INC.

TRANSPORTATION BY LUD, INC.

200,000 HILES

TOTAL FOR L U D TRUCKING, INC

GRAND TOTAL

OK

THIS IS A CONSOLIDATED STATEHENT OF ALL L U D SUBSIDIARIES

PLEASE SEND A COPY OF INVOICE(S) WITH PAYMENT.

IF NOT PAID WITHIN 30 DAYS FROM RECEIPT, A CARRYING CHARGE OF ONE & ONE-HALF PERCENT PER MONTH WILL BE ADDED (TOTAL ANNUAL RATE, 18%).



INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED

EPA Form 8700-22 (Rev. 9-86) MDNR-HWG 10 PREVIOUS EDITIONS ARE OBSOLETE

SHIPMENTS

MISSOURI DEPARTMENT OF NATURAL RESOURCES
Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3176

BMckee

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURC
314-834-236

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on elite (12-pitch) typewriter.) Form Approved. OMB No. 2050-0039, Expires 9-30-88 UNIFORM HAZARDOUS 1. Generator's US EPA ID No 2. Page _____ Information in the shaded areas 3 10 Document No. 1 M, O, D, O, O, S, 1, 8, 9 **WASTE MANIFEST** . 5 is required by State law. 3. Generator's Name and Mailing Address A. Missouri Manifest Document Number McDonnell Douglas Corporation - St. Louis 0 1 0 0 1 P.O. Box 516, St. Louis, Missouri 63166 B. State Generator's ID - other 4. Generator's Phone (314) 232-3319 *01001 5. Transporter 1 Company Name C. MO. Transporter's ID 6. US EPA ID Number LWD, Inc. K Y D 0 8 8 4,3,8,8,1,7 D. Transporter's Phone (502) 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID None F. Transporter's Phone 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID LWD, Inc. KYD088438817 P.O. Box 327, Highway 1523 H. Facility's Phone Calvert City, Kentucky 42029 K. Y. D. O. 8, 8, 4, 3, 8, 8, 1, 7 (502) 395-8313 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) CIBIAL Total Unit I. Waste No. Quantity 4 1 RQ = 1 1b.Waste ORM-A, N.O.S. FU01 NA1693 (F001, F002) D. M.O. 9.7.7.0 NER R0 = 100 lbs.Waste Flammable Liquid, N.O.S. Flammable Liquid UN1993 (F005, F003, D001) 0 Hazardous Waste, Liquid, N.O.S. ORM-E NA9189 MACE Other J. Additional Descriptions for Materials Listed Above K. Handling Codes for Wastes Listed Above m. Chlorinated Solvent CB64 AFTURN FROM T06 TOK b. Flammable Liquid CB63 T06 TO7 CB65 . 3TO 1 Waste Oil 15. Special Handling Instructions and Additional Information AFTER ITS "If unable to deliver to designated TSD facility, return to generator." Lab Sample Number: 4947 Specific Gravity: 1-099 Chlorine % by Wt.: 1.67 16 GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. THIS CODY MIIST RF RETAINED BY THE GENERATOR If I am a large quantity operator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method available to me that I can afford. Printed/Typed Name Signature Day ANNETTE C. SCHUET 10018 17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Day Signature Month 1040 Reu 18. Transporter 2 Acknowledgement of Receipt of Materials Date .Printed/Typed Name Day Signature Month 19. Discrepancy Indication Space F A 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Date T Printed/Typed Name Dav Signature Month Year

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET. THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3176

HAZARDOUS WASTE MANIFEST

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCE
314-634-2436

lease print or type (Form designed for use on elite (12-pitcl	ı) typewriter.)		Form A	pproved. OMB N	No. 2050–0039, Expir	es 9-30-88
UNIFORM HAZARDOUS	1. Generator's US EPA ID No.	Manifest No.	2. Page	Informatio	n in the shaded a	reas
WASTE MANIFEST	M, O, D, O, O, S, 1, 8, 9, 5	3 Document No. 8	of 1	is required	by State law.	
3. Generator's Name and Mailing Address				rifest Document	Number	SEE 1584
McDonnell Douglas Corpo:	ration - St. Louis		115/1/ 8. (CBC) to UP > 9.01(0.016) to 10.01	,0,1	THE RESIDENCE OF THE PARTY OF T	0 8
P.O. Box 516, St. Louis	Missouri 63166			100	1000	0 1 0
4. Generator's Phone (314) 232–3319	, 112000011		B. State Genera		49.2 (A. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	
5. Transporter 1 Company Name			A CONTRACTOR OF THE PARTY OF TH	THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.		RESERVED.
	6. US EPA ID Number	/ 7 7 0 0 1	C. MO. Transpo			703 3
LWD Trucking, Inc.	K, Y, D, 9, 8, 1,	4, 1, 1, 8, 2, 1	D. Transporter's	Phone (5	02) 395–8.	313
7. Transporter 2 Company Name	8. US EPA ID Number		E. MO. Transpo	rter's ID	i transferiore	
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Designated Facility Name and Site Address	10. US EPA ID Number		G. State Facility	's ID		88425
LWD, Inc.			KY	D0884388	17	
P.O. Box 327, Highway 1:	523	and the second	H. Facility's Pho	one	114846	4004000
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15. Special Handling Instructions and Additional Informa	tion	Service of				
"If unable to deliver to	o designated TSD facili	ty, return t	o genera	tor."	KY-250	
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16. GENERATOR'S CERTIFICATION: I hereby declare the labeled, and are in all respects in proper condition for						
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ANNETTE C. SCHUE	7>	III C.	Selu	1	110119	11871
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17. Transporter 1 Acknowledgement of Receipt of Material Printed/Typed Name	Signature	7			Month Day	
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18. Transporter 2 Acknowledgement of Receipt of Material Printed/Typed Name		2			Date	
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19. Discrepancy Indication Space			New Year			
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20. Facility Owner or Operator: Certification of receipt of	hazardous materials covered by this manifest ex	cept as noted in Item 19.	and the second section is a second			
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Printed/Typed Name	Signature	/			Month Day	Year
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A Form 8700-22 (Rev. 9-86) MDNR-HWG 10 PREVIOUS E	DITIONS ARE OBSOLETE			7		

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MISSOURI DEPARTMENT OF NATURAL RESOURCES Division of Environmental Quality Waste Management Program P.O. Box 176 Jefferson City, Missouri 65102 314-751-3176

EMERGENCY RESPONSE
U.S. COAST GUARD
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1-800-424-8300
DEPT. OF NATURAL RESOURC:
314-634-2436

HAZARDOUS WASTE MANIFEST

ase print or type (Form designed for use on elite (12-pitch) typewriter.)			Form Approved. C	MB No.	2050-0039, Expires 9-30
UNIFORM HAZARDOUS 1. Generator's US EPA ID No.	Manifest Document No.	2. Page	Inform	nation in	the shaded areas
WASTE MANIFEST	Document No. 5	of _	i is requ	ired by	State law.
3. Generator's Name and Mailing Address		A. Miss	ouri Manifest Docu	_	The second secon
McDonnell Douglas Corporation - St. Louis			1 2 4		
P.O. Box 516, St. Louis, Missouri 63166					多國軍政府 医三十二
4. Generator's Phone (314) 232-3319			Generator's ID - 01248	otner	
		5170,300	CONTROL LANGUAGE	15-95	
	7007	C. MO.	Transporter's ID		1082
	1041	D. Trans	sporter's Phone	(302)	395-3313
7. Transporter 2 Company Name 8. US EPA ID Number		E. MO.	Transporter's ID		
None		F. Trans	porter's Phone		
Designated Facility Name and Site Address 10. US EPA ID Number	to the second	G. State	Facility's ID	S. Paris	
LWD, Inc.	100		KYD08843	38817	
P.O. Box 327, Highway 1523	21 21	H. Facili	ty's Phone	11 - 1	
Calvert City, Kentucky 42029 K Y D 0 8 8 4 3	8 8 1 7		(502) 39	95-83	313
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12. Contain		13.	14.	ALL ALLESS AND ALLESS
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J. Additional Descriptions for Materials Listed Above	SERVICE SERVICE		ling Codes for Wast	es Lieted	Above
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b. Flammable Solvent CB63	CHANGE IN	TO	5, 707	2 50	
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15. Special Handling Instructions and Additional Information	return t				KY-251
15. Special Handling Instructions and Additional Information "If unable to deliver to designated TSD facility."	return t	o ge	nerator."	ht:	KY-251
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MCDONNELL AIRCRAFT COMFANY

Box 516, Saint Louis, Missouri 63166 (314) 232-0232

1 September 1987

RECEIVED INDUSTRIAL SOLVENTS - 50500

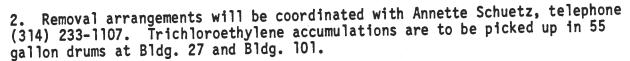
Safety-Kleen Corporation P.O. Box 1419 Elgin, IL 60120

SEP 1 0 1937

MDC Sale 14-87, Award of Waste Trichloroethylene 8-20-87 through 12-31-88

Gentlemen:

1. This is to inform you that you have been awarded the following material included in subject sale.



- 3. Your bid and Exhibit B indicated that you have been issued Hazardous Waste Transporter License No. H-1273 and Hazardous Waste Recycling Permit No. 0316000053 for Illinois and Illinois Facility No. 1980-39-0P.
- 4. You will be informed when to remove waste Trichloroethylene from MDC facilities. Removals must be accomplished between the hours of 8:00 A.M. and 2:00 P.M., Monday thru Friday. Trailers will be rejected if they are not the proper nature or in poor condition as to cause loss of material during transit or otherwise do not comply with D.O.T. requirements.
- 5. Each removal will be accompanied by an Illinois Hazardous Waste Manifest. Within two weeks after receipt of the Trichloroethylene at Safety-Kleen Corp., the completed Generater's copies of the manifest shall be returned to: Environmental Compliance, Dept. 891C, McDonnell Douglas Corp., P.O. Box 516, St. Louis, MO 63166, Attn: Mr. B. McKee.
- 6. Safety-Kleen Corp. will be required submit a copy of their EPA registration number, State Facility number, and Missouri Transport license documents to: Environmental Compliance, Dept. 891C, McDonnell Douglas Corp., P.O. Box 516, St. Louis, MO 63166, Attn: Mr. B. McKee before the material will be shipped from MDC.
- 7. Your attention is invited to Para. 7 of Conditions of Sale, regarding payment for material. It is the decision of our Credit Dept. to waive the requirements of a cash deposit so long as payment for delivered material is made within 10 days from date of invoice as specified in terms of the sale. Remittances should be made payable to McDonnell Douglas Corporation and forwarded to: Cashier, McDonnell Douglas Corp., P.O. Box 516, St.Louis, Missouri 63166.



1 September 1987

- 8. In accepting this award, the purchaser certifies to MDC that disposition of the solvent will be in compliance with all applicable EPA, State and Local rules and regulations regarding Hazardous Waste.
- 9. Should Safety Kleen Corp., during the terms of the contract, be unable to operate as a hazardous waste facility, and therefore unable to receive hazardous waste, at its option, cancel the contract without penalty. Plus MDC, at its option, has the right to cancel this contract by notifying Safety-Kleen Corp., 10 days from date of this letter, without penalty.
- 10. This award is subject to all terms and conditions in MDC Sale 14-87, dated 23 March 1987.
- 11. Please return one copy back with signatures to the undersigned.

Very truly yours,

W. Earl Campbell

Salvage & Reclamation Coord.

Dept. 764, Bldg. HQ

WEC: le/WEC.F32

Accepted by Safety-Kleen Corp.

Authorized Signature

Alex M. Freeman

Title General Sales Manager

MISSOURI DEPARTMENT OF NATURAL RESOURCES

INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCE
314-634-2436

HAZARDOUS WASTE MANIFEST

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INSTRUCTIONS FOR THE COM-PLETION OF THIS FORM ARE ON A SEPARATE SHEET.

THIS DOCUMENT MUST BE USED FOR ALL MISSOURI-DESTINED SHIPMENTS.

MISSOURI DEPARTMENT OF NATURAL RESOURCES

Division of Environmental Quality
Waste Management Program
P.O. Box 176 Jefferson City, Missouri 65102
314-751-3241

EMERGENCY RESPONSE
U.S. COAST GUARD
1-800-424-8802
CHEM TREC
1-800-424-9300
DEPT. OF NATURAL RESOURCES
314-834-2436

HAZARDOUS WASTE MANIFEST

Please print or type (Form designed for use on elite (12-Pitch) typewriter.) Form Approved. OMB No. 2050-0039. Expires 9-30-88 1. Generator's US EPA ID No. UNIFORM HAZARDOUS Manifest Document No. 2. Page 1 Information in the snaded areas WASTE MANIFEST man 2008 18 is required by State Generator's Name and Mailing Addre Ban Walling Add A. Missouri Manifest Document Number 0,3 011 2141 3125 4. Generator's Phone (5) B. State Generator's ID - other 1) 5. Transporter 1 Company Name 6. US EPA ID Number C. MO. Transporter's ID PART A-Fetu-K LLD05/06040 D. Transporter's Phone 10 7. Transporter 2 Company Name 8. US EPA ID Number E. MO. Transporter's ID F. Transporter's Phone .1 9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID ムナモアリー COPY CD12 C H. Facility's Phone 63303 11M0000954 0 GENERATOR FINAL 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID NUMBER) 13. 14. Total Waste No. Quantity Wt/Vo 33 MO m p u Other PA GE TAN 20.00 N ER 14 Other 5 ٢ A) M MO. 0 R Other d. MO: Other GENERATOR AFTER ITS RETURN FROM K. Handling Codes for Wastes Listed Above Additional Descriptions for Materials Listed Abov 15. Special Handling instructions and Additional Information NADIC 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations and applicable state regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

| Signature | Signature | Month | Day | Year | Year | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Day | Year | Month | Month | Day | Year | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Month | Mo Signature NINET-THE 17. Transporter 1 Acknowledgement of Receipt of Materials Date Printed/Typed Name BY Signature Month Day Steve Denesse PIB BE RETAINED 18. Transporter 2 Acknowledgement of Receipt of Materials Date Printed/Typed Name Signature Day 19. Discrepancy indication Space COPY MUST AC I 20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19. Date Printed/Typed Name Month Day THIS (EPA Form 8700-22 /Rev. 9-86) MDNR-HWG 10